

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.
Citizens for Ron McKenzie

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER**
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
STATE DISTRICT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

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

Election on in the State of

(c) 30-Day **POST**-Election Report for the:

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

Election on in the State of

5. Covering Period through

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

Type or Print Name of Treasurer Sheffeld, Trimaine, , ,

Signature of Treasurer Sheffeld, Trimaine, , , Date

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

Office Use Only									
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SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Citizens for Ron McKenzie

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 02 / 27 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	50.00	38355.26
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	50.00	38355.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	33257.81
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	33257.81
8. Cash on Hand at Close of Reporting Period (from Line 27)	53.35	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	8662.76	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Citizens for Ron McKenzie

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	50.00	28409.00
(ii) Unitemized.....	0.00	9933.26
(iii) TOTAL of contributions from individuals ▶	50.00	38342.26
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	13.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	50.00	38355.26
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	9000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	9000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	50.00	47355.26

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	33257.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	700.00	14044.10
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	700.00	47301.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	703.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	50.00
25. SUBTOTAL (add Line 23 and Line 24).....	753.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	700.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	53.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 7	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Citizens for Ron McKenzie

A. Integrated Solutions: Political

Full Name (Last, First, Middle Initial)

Mailing Address 4142 Adams Avenue
Suite 103-550

City San Diego State CA Zip Code 92116

Purpose of Disbursement compliance software Category/Type

Candidate Name

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

State: District:

Date of Disbursement / /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : B-538

Memo Item

B. Run!

Full Name (Last, First, Middle Initial)

Mailing Address 651 North Broad Street

City Middletown State DE Zip Code 19709

Purpose of Disbursement website development and hosting Category/Type

Candidate Name

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

State: District:

Date of Disbursement / /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : B-536

Memo Item

C. Run!

Full Name (Last, First, Middle Initial)

Mailing Address 651 North Broad Street

City Middletown State DE Zip Code 19709

Purpose of Disbursement website development and hosting Category/Type

Candidate Name

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

State: District:

Date of Disbursement / /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : B-537

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="700.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="700.00"/>

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : C-383**
Citizens for Ron McKenzie

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
McKenzie, Ronald, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 1617 Mallard Circle		<input type="checkbox"/> General
City Conley		<input type="checkbox"/> Other (specify) ▼
State GA	ZIP Code 30288	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 9000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 8662.76
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 04 / 22 / 2025	M M / D D / Y Y Y Y 05/19/2026	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	8662.76
TOTALS This Period (last page in this line only).....▶	8662.76

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