

**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.

1 2 F E 4 M 5

BUDDY CARTER FOR CONGRESS

ADDRESS (number and street)

PO BOX 10570

Check if different
than previously
reported. (ACC)

SAVANNAH

GA

31412-0770

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00543967

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

GA

01

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

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

2025

through

M M /

D D /

Y Y Y Y

03

31

2025

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

Type or Print Name of Treasurer

KILGORE, PAUL, , ,

Signature of Treasurer

KILGORE, PAUL, , ,

Date

M M /

D D /

Y Y Y Y

04

15

2025

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

BUDDY CARTER FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2025

To:

MM / DD / YYYY
03 / 31 / 2025

	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))....	418472.48	468403.81
(b) Total Contribution Refunds (from Line 20(d))	1700.00	3700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	416772.48	464703.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	90593.86	166409.42
(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))	90593.86	166409.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3463345.96	
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)	0.00	

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

BUDDY CARTER FOR CONGRESS

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y
03 31 2025**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).....**

117742.00

133367.00

(ii) Unitemized

11730.48

14536.81

**(iii) TOTAL of contributions
from individuals**

129472.48

147903.81

(b) Political Party Committees.....

0.00

0.00

**(c) Other Political Committees
(such as PACs)**

289000.00

320500.00

(d) The Candidate

0.00

0.00

**(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..**

418472.48

468403.81

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES**

118237.00

118237.00

13. LOANS:**(a) Made or Guaranteed by the
Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

**(c) TOTAL LOANS
(add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)**

0.00

0.00

**15. OTHER RECEIPTS
(Dividends, Interest, etc.)**

0.00

25677.04

**16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4).....**

536709.48

612317.85

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.....

90593.86

166409.42

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

1700.00

1700.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

2000.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

1700.00

3700.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

92293.86

170109.42

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

3018930.34

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

536709.48

25. SUBTOTAL (add Line 23 and Line 24).....

3555639.82

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

92293.86

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

3463345.96

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 141

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

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

NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALMON, WINETTE, T., ,

A.

Mailing Address 2073 SUTHERLAND BLUFF DR NE

City

TOWNSEND

State

GA

Zip Code

31331-3107

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA97B0E82621A4C74BDC

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

ANSCHUTZ, PHILLIP, , ,

Mailing Address 555 17TH ST
STE 2400

City

DENVER

State

CO

Zip Code

80202-3941

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE ANSCHUTZ COMPANY

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AC9F06CFB4E6A4C04BD1

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

ANSCHUTZ, PHILLIP, , ,

Mailing Address 555 17TH ST
STE 2400

City

DENVER

State

CO

Zip Code

80202-3941

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE ANSCHUTZ COMPANY

Occupation

CEO

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A7AC1FFF5676F4BB3BA7

Amount of Each Receipt this Period

3500.00

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

8000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ATKINS, ALLEN, DALE, ,

A. Mailing Address 929 BLACKSHEAR HWYCity
BAXLEYState
GAZip Code
31513-6753FEC ID number of contributing
federal political committee.

C

Name of Employer
THE ATKINS AGENCYOccupation
OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A0865C660AAF149A8ACE

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AYRES, DAVID, H., ,

B. Mailing Address 382 RAZOR STRAP RDCity
NORTH EASTState
MDZip Code
21901-2718FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHSIDE PHARMACYOccupation
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : A0A6032C820E74020882

Amount of Each Receipt this Period

450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AYULO, MARCO, A., ,

C. Mailing Address 1031 LYNN DRCity
WAYCROSSState
GAZip Code
31503-8539FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

Transaction ID : A15311CA26BC240088E9

Amount of Each Receipt this Period

500.00

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

1450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BAUM, MARK, , ,

A.

Mailing Address 710 JACKSON BLVD

City

NASHVILLE

State

TN

Zip Code

37205-3879

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARROW, INC.Occupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	5

Transaction ID : AE05F265FDDDF74497B66

Amount of Each Receipt this Period

1500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : AFBF0EF364418442CB0B

Amount of Each Receipt this Period

1500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BAXLEY WELLNESS PHARMACY

C.

Mailing Address 160 AZALEA RD

City

BAXLEY

State

GA

Zip Code

31513-9195

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : AF47F347E27174B39B94

Amount of Each Receipt this Period

500.00

☐ Memo ItemPENDING VERIFICATION OF FEDERALLY
PERMISSIBLE FUNDS**SUBTOTAL** of Receipts This Page (optional)..... ▶

2000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BGR GOVERNMENT AFFAIRS**A.**

Mailing Address PO BOX 14416

City

WASHINGTON

State

DC

Zip Code

20044-4416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A3839D1B17A79402DA30

Amount of Each Receipt this Period

1000.00

☐ Memo ItemPENDING VERIFICATION OF FEDERALLY
PERMISSIBLE FUNDS**B.**

Full Name (Last, First, Middle Initial)

BOATWRIGHT, STEVEN, L, ,

Mailing Address 8895 ROSEMARK RD

City

MILLINGTON

State

TN

Zip Code

38053-4862

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AD6634E45C2FB47FC8C0

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BRADLEY, MICHAEL, , ,

Mailing Address 300 OLD MILL LN

City

EXTON

State

PA

Zip Code

19341-2582

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NATIONAL MAIL GRAPHICS CORPORATION

CFO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 24 2025

Transaction ID : A1A652F9CF268460D948

Amount of Each Receipt this Period

750.00

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

2750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BUKI, CHRISTOPHER, , ,

A.

Mailing Address 531 S SAINT ASAPH ST

City

ALEXANDRIA

State

VA

Zip Code

22314-4116

FEC ID number of contributing
federal political committee.

C

Name of Employer

WEST FRONT STRATEGIES

Occupation

SENIOR VP

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

Transaction ID : A04B99285FEB744E4906

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BURKE, FRED, PARKER, ,

B.

Mailing Address 30 WAKEFIELD DR NE

City

ATLANTA

State

GA

Zip Code

30309-1515

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN PHARMACY

Occupation

PRESIDENT/CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : A1F97615E47214042ACC

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CAPES, JEFF, O., ,

C.Mailing Address 110 OFFICE PARK LN
STE 104

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFFORDABLE DENTAL CARE

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

398.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	5

Transaction ID : AD42B9E2478564F47854

Amount of Each Receipt this Period

199.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

3199.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y
01 13 2025

Transaction ID : A16134C0142A94B2CBA3

Amount of Each Receipt this Period

199.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

CAPES, JEFF, O., ,

Mailing Address 110 OFFICE PARK LN
STE 104

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFFORDABLE DENTAL CARE

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

597.00

Date of Receipt

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

Transaction ID : AA163D7DC9B9D4B928E6

Amount of Each Receipt this Period

199.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

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

Transaction ID : ACC2220F84902425CAA1

Amount of Each Receipt this Period

199.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

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

199.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CAPES, JEFF, O., ,

A.Mailing Address 110 OFFICE PARK LN
STE 104

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFFORDABLE DENTAL CARE

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

796.00

Date of Receipt

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

Transaction ID : A4BB55B31D6734AC7928

Amount of Each Receipt this Period

199.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y
03 10 2025

Transaction ID : AD79F1630E0484DADA7A

Amount of Each Receipt this Period

199.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

CARTER, THAD, , ,

C.

Mailing Address PO BOX 694

City

FERNANDINA BEACH

State

FL

Zip Code

32035-0694

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

TIMBER / REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : A8B319BAAEEA14216AFE

Amount of Each Receipt this Period

1000.00

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

1199.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CATHCART, WILLIAM, L., ,

A. Mailing Address 8 PLANK HOUSE RDCity
SAVANNAHState
GAZip Code
31410-1028FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A37C4AB670CBB404AA48

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHARLES, DAVID, , ,

B. Mailing Address 1401 FREEDOM DRCity
CHARLOTTEState
NCZip Code
28208-5255FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AAAEB5D3062FD4AB0B5F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CIOFFI, GINA, , ,

C. Mailing Address 492 WAVERLY PLCity
LONG BRANCHState
NJZip Code
07740-5567FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AA98FF1F98CA44CD89FC

Amount of Each Receipt this Period

500.00

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

2500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

COLE, PATRICE, ANN, ,

A.

Mailing Address 219 DEBRA RD

City
SAVANNAHState
GAZip Code
31410-2326FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : A3E52133C43D048FFB05

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DANIEL, MARVIN, C, ,

B.

Mailing Address 153 WARNELL DR

City
RICHMOND HILLState
GAZip Code
31324-4828FEC ID number of contributing
federal political committee.

C

Name of Employer
DANIEL DEFENSE LLCOccupation
FOUNDER & CHAIRMAN

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A3FC3DBBC830A4E91B10

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DANIEL, MARVIN, C, ,

C.

Mailing Address 153 WARNELL DR

City
RICHMOND HILLState
GAZip Code
31324-4828FEC ID number of contributing
federal political committee.

C

Name of Employer
DANIEL DEFENSE LLCOccupation
FOUNDER & CHAIRMAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A1CE94E7DA19D4D7986C

Amount of Each Receipt this Period

3500.00

☐ Memo Item

7500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAWSON, STEVEN, G, ,

A. Mailing Address PO BOX 261

City

MC DOWELL

State

KY

Zip Code

41647-0261

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : AB0B74689FFFB4E3B933

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DELMONTE, BRENT, , ,

B. Mailing Address 2901 28TH ST NW

City

WASHINGTON

State

DC

Zip Code

20008-3414

FEC ID number of contributing
federal political committee.

C

Name of Employer
BGR GROUPOccupation
PRINCIPAL

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 07 2025

Transaction ID : AB420FF45F9A34AE8A6F

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DONOHUE, THOMAS, , ,

C. Mailing Address 237 LYMAN HALL

City

SAVANNAH

State

GA

Zip Code

31410-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer
COASTAL WOUND PHYSICIANSOccupation
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 04 2025

Transaction ID : A4E161F13AF994076A44

Amount of Each Receipt this Period

2000.00

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

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DUCKWORTH, MATTHEW, , ,

A.

Mailing Address 3088 WOODWALK DR SE

City
ATLANTAState
GAZip Code
30339-8472FEC ID number of contributing
federal political committee.

C

Name of Employer
HART HEALTH STRATEGIESOccupation
LOBBYIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA66AE48FF1284D73BE6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EARDENSOHN, TODD, , ,

B.

Mailing Address PO BOX 14416

City
WASHINGTONState
DCZip Code
20044-4416FEC ID number of contributing
federal political committee.

C

Name of Employer
BGR GOVERNMENT AFFAIRSOccupation
CFO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 04 2025

Transaction ID : A4A34C03B42954A83862

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELEY, BILL, , ,

C.

Mailing Address 3121 BOXWOOD DR

City
MONTGOMERYState
ALZip Code
36111-1103FEC ID number of contributing
federal political committee.

C

Name of Employer
APCIOccupation
LEGISLATIVE DIRECTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : AF11B839E89514AD2A54

Amount of Each Receipt this Period

250.00

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

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

FERREIRA, RICHARD, , ,

A.

Mailing Address 111 US HIGHWAY 80 SE

City
POOLERState
GAZip Code
31322-2533FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A37FDC9523E1649DCA5B

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

FERREIRA, RICHARD, , ,

Mailing Address 111 US HIGHWAY 80 SE

City
POOLERState
GAZip Code
31322-2533FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 05 2025

Transaction ID : AD8F4FBE77FD8414BA08

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

FOGG, PHILLIP, , , JR.

Mailing Address 4560 SE INTERNATIONAL WAY
STE 100City
PORTLANDState
ORZip Code
97222-4628FEC ID number of contributing
federal political committee.

C

Name of Employer
CONSONUS HEALTHCAREOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A680F4F7E27D5485D998

Amount of Each Receipt this Period

3500.00

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

3700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

FOGG, PHILLIP, , JR.

A.Mailing Address 4560 SE INTERNATIONAL WAY
STE 100City
PORTLANDState
ORZip Code
97222-4628FEC ID number of contributing
federal political committee.

C

Name of Employer
CONSONUS HEALTHCAREOccupation
CEO

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : A5754E7BB8A9247A89F8

Amount of Each Receipt this Period

1500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

GAYCO HOLDINGS LLC

Mailing Address 507 INDUSTRIAL BLVD

City
DUBLINState
GAZip Code
31021-1714FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : A4A0F2C79F5044AC383B

Amount of Each Receipt this Period

2500.00

☐ Memo Item

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS

C.

Full Name (Last, First, Middle Initial)

GAY, BENT, , ,

Mailing Address 1794 U.S. 441

City
DUBLINState
GAZip Code
31021FEC ID number of contributing
federal political committee.

C

Name of Employer
GAYCO HEALTHCAREOccupation
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : AD095808A23A8425AA9D

Amount of Each Receipt this Period

2500.00

☒ Memo Item

PARTNERSHIP: GAYCO HOLDINGS LLC

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

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GHAZAL, JAY, , ,

A.Mailing Address 1331 H ST NW
STE 701City
WASHINGTONState
DCZip Code
20005-4737FEC ID number of contributing
federal political committee.

C

Name of Employer
GHAZAL & ASSOCIATES, LLCOccupation
SOLE PROPRIETOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2025

Transaction ID : A8452CBD6D1CA4A6C807

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GODBEY, PAT, , ,

B.

Mailing Address 308 FLANDERS LNDG

City
SAINT SIMONS ISLANState
GAZip Code
31522-9736FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHEASTERN PATHOLOGY ASSOCIATESOccupation
PATHOLOGIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : AC831DF22E4CB4CD5BD0

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GREENE, LUCY, R., ,

C.

Mailing Address 2005 HAMMOCK DR

City
VALDOSTAState
GAZip Code
31602-2150FEC ID number of contributing
federal political committee.

C

Name of Employer
VALDOSTA STATE UNIVERSITYOccupation
EDUCATOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 28 / 2025

Transaction ID : A89525F9201724127B28

Amount of Each Receipt this Period

300.00

☐ Memo Item

4100.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GREENE, WILLIAM, G., ,

A.

Mailing Address 112 MODENA ISLAND DR

City

SAVANNAH

State

GA

Zip Code

31411-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer

ATLANTIC RADIOLOGY ASSOCIATES

Occupation

RADIOLOGIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : A64B9A59A7C98406C94B

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HAMMOND, CHRIS, , ,

B.

Mailing Address 345 SPANTON CRES

City

POOLER

State

GA

Zip Code

31322-9621

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREAT DANE

Occupation

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	2	5

Transaction ID : A958D4492DAB84510891

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HAMRICK, TIMOTHY, R., ,

C.

Mailing Address 431 MCCLAIN RD

City

HUEYTOWN

State

AL

Zip Code

35023-5529

FEC ID number of contributing
federal political committee.

C

Name of Employer

APCI

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : AFE673629D3FA46949E3

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

1100.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

HATZIS, LUKE, , ,

A.

Mailing Address 70 N ST SE

APT 406

City

WASHINGTON

State

DC

Zip Code

20003-4897

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITOL COUNSELOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

Transaction ID : ACEF8678113CF4F1DBBB

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HAYNES, WINSTON, G., ,

B.

Mailing Address 1028 BEACHVIEW DR

APT 4

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-5039

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : A5533546EA04143859C8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEDERICK, JEFF, , ,

C.

Mailing Address 302 ORCHARD WAY

City

WAYNE

State

PA

Zip Code

19087-4834

FEC ID number of contributing
federal political committee.

C

Name of Employer
TWIN RIVERS PAPER CO INCOccupation
CHIEF COMMERCIAL OFFICER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

Transaction ID : A3DFB6C0A96FC48AF8CE

Amount of Each Receipt this Period

500.00

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

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

HODGES, SHAWN, , ,

A.

Mailing Address 1677 BURNT HICKORY RD NW

City

MARIETTA

State

GA

Zip Code

30064-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer
REVELATION PHARMOccupation
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2025

Transaction ID : A4FB3660867A940CEA57

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

HODGES, SHAWN, , ,

Mailing Address 1677 BURNT HICKORY RD NW

City

MARIETTA

State

GA

Zip Code

30064-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer
REVELATION PHARMOccupation
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2025

Transaction ID : AF3D365CC445D4FC28F0

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

C.

Full Name (Last, First, Middle Initial)

HODGES, SHAWN, , ,

Mailing Address 1677 BURNT HICKORY RD NW

City

MARIETTA

State

GA

Zip Code

30064-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer
REVELATION PHARMOccupation
PHARMACIST

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2025

Transaction ID : AE878911AA00646289CC

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

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

5000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

HODGES, VICKI, S., ,

A.

Mailing Address 115 BRADLEY CREEK XING

City
SAVANNAHState
GAZip Code
31410-3560FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : A089DA4F1C3C54836A1D

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HOPP, MATTHEW, E., ,

B.

Mailing Address 790 SAN ANTONIO DR NE

City
ATLANTAState
GAZip Code
30306-3433FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ACFAB3438E6CD4929BDB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUDGINS, GERALD, W., ,

C.Mailing Address 115 WESTRIDGE INDUSTRIAL BLVD
STE 300City
MCDONOUGHState
GAZip Code
30253-9102FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A0621AC49CE354CE1A33

Amount of Each Receipt this Period

500.00

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

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

IMHOFF, SUSAN, M., ,

A.

Mailing Address PO BOX 31192

City

SEA ISLAND

State

GA

Zip Code

31561-1192

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	5	

Transaction ID : A4D399D1395FF439C84C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JOHNSON, J., ALEXANDER, ,

B.

Mailing Address 132 W PARKER ST

City

BAXLEY

State

GA

Zip Code

31513-0658

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	5	

Transaction ID : AE8186578BC4D45D9AB3

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JONES, SARAH, ALLISON, ,

C.

Mailing Address 311 W MYRTLE ST

City

ALEXANDRIA

State

VA

Zip Code

22301-2428

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOEING

Occupation

MANUFACTURING

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	5	

Transaction ID : A8B15F75F6E7E4EE2A87

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

1750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KEARNS, CONRAD, T., ,

A.

Mailing Address 4 SAPPHIRE ISLAND RD

City
SAVANNAHState
GAZip Code
31410-1641FEC ID number of contributing
federal political committee.

C

Name of Employer
CESOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AE985307E7D1F4A0FA64

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KELLY, CHRIS, , ,

B.Mailing Address 659 S CAROLINA AVE SE
APT 1006City
WASHINGTONState
DCZip Code
20003-2751FEC ID number of contributing
federal political committee.

C

Name of Employer
BGR GROUPOccupation
PARTNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A32B97E467F534C37B1F

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KING, CARYN, , ,

C.

Mailing Address 545 CLIPPER SHIP LN

City
ATLANTIC BEACHState
FLZip Code
32233-4112FEC ID number of contributing
federal political committee.

C

Name of Employer
TWIN RIVERS PAPEROccupation
MARKETING VP

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 24 2025

Transaction ID : AE41B6DF664184D79A65

Amount of Each Receipt this Period

500.00

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

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KNUTZ, JONATHAN, , ,

A. Mailing Address 5602 CEDAR CREEK DRCity
HOUSTONState
TXZip Code
77056-2310FEC ID number of contributing
federal political committee.

C

Name of Employer
LEGACY MEDICALOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : ADB6FA1DAB4E84534902

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KRAMER, BRIAN, , ,

B. Mailing Address 1715 N WELLS ST
APT 33City
CHICAGOState
ILZip Code
60614-5884FEC ID number of contributing
federal political committee.

C

Name of Employer
FORUM EXTENDED CARE SERVICESOccupation
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : AF2581D247DAB49C58F1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LEFKOFSKY, ERIC, , ,

C. Mailing Address 540 N DEARBORN ST
UNIT 101043City
CHICAGOState
ILZip Code
60610-1077FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A5CD8B73555C8414B831

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

5000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

LEONARD, DANIEL, T., ,

A.

Mailing Address 1921 CARROLLTON RD

City

ANNAPOLIS

State

MD

Zip Code

21409-6244

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : ACA540881D61A4DF2A48

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

LIVANIOS, PAGONA, , ,

Mailing Address 8307 SUMMER REEF DR

City

HOUSTON

State

TX

Zip Code

77095-4354

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A3A74D6C6185549489B3

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

LTC PHARMACY MANAGEMENT LLC

Mailing Address PO BOX 12898

City

ALEXANDRIA

State

LA

Zip Code

71315-2898

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AE03E1D0A03574F4A8C8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS

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

4000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MAHFOUZ, SAMUEL, T, ,

A. Mailing Address PO BOX 12898

City

ALEXANDRIA

State

LA

Zip Code

71315-2898

FEC ID number of contributing
federal political committee.

C

Name of Employer

LTC PHARMACY MANAGEMENT LLC

Occupation

MANAGING MEMBER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 06 / 2025

06

2025

Transaction ID : A1B4476FB5EA7481BABA

Amount of Each Receipt this Period

2500.00



Memo Item

PARTNERSHIP: LTC PHARMACY MANAGEMENT
LLC**B.** Full Name (Last, First, Middle Initial)
LUREY, JEFFREY, LEWIS, ,

Mailing Address 1082 JUDITH WAY NE

City

ATLANTA

State

GA

Zip Code

30324-2905

FEC ID number of contributing
federal political committee.

C

Name of Employer

GPHA

Occupation

PHARMACIST

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

03

2025

Transaction ID : A58B651EF4E944560B47

Amount of Each Receipt this Period

250.00



Memo Item

C. Full Name (Last, First, Middle Initial)
MCDONOUGH, JOE, , ,
Mailing Address PO BOX 20569

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-0169

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025

28

2025

Transaction ID : AA7A861C531CD45808BB

Amount of Each Receipt this Period

1000.00



Memo Item

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

1250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MCFADDEN, LEDYARD, , ,

A.

Mailing Address 4 ASHLAND AVE

City

MANCHESTER

State

MA

Zip Code

01944-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A952EFFEA20C74D0BB3B

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MCFADDEN, LEDYARD, , ,

Mailing Address 4 ASHLAND AVE

City

MANCHESTER

State

MA

Zip Code

01944-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 01 2025

Transaction ID : AA380721A6D1044C6902

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

MOHLMAN, THEODORE, , ,

Mailing Address 923 CHAMPNEY

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-5467

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

Transaction ID : AA8B3364CD5BF4A00921

Amount of Each Receipt this Period

250.00

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

450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 141

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

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

NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MORRISON, KEITH, GREGORY, ,

A. Mailing Address 3358 STUYVESANT PL NW

City

WASHINGTON

State

DC

Zip Code

20015-2454

FEC ID number of contributing
federal political committee.

C

Name of Employer

VAN SCOYOC ASSOCIATES

Occupation

CONSULTANT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
0	3		2	2		2	0	5	

Transaction ID : A6064D925A247484D980

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORTON, DAVID, J., ,

B. Mailing Address 1177 WESTWIND DR

City

NEENAH

State

WI

Zip Code

54956-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer

MORTON DRUG CO.

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
0	2		0	6		2	0	5	

Transaction ID : A41B3667CFE1A4319BE8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MURACH, RICHARD, , ,

C. Mailing Address 25 MOHAWK AVE

City

RED BANK

State

NJ

Zip Code

07701-5856

FEC ID number of contributing
federal political committee.

C

Name of Employer

TWIN RIVERS PAPER COMPANY

Occupation

SALES

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
0	3		2	5		2	0	5	

Transaction ID : AE80C81BC952A48A1A39

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

2500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MUSK, ELON, , ,

A.

Mailing Address PO BOX 341886

City
AUSTINState
TXZip Code
78734-0032FEC ID number of contributing
federal political committee.

C

Name of Employer
SPACEXOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2025

Transaction ID : A3ECE9C7C9821437E9A6

Amount of Each Receipt this Period

6600.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MUSK, ELON, , ,

Mailing Address PO BOX 341886

City
AUSTINState
TXZip Code
78734-0032FEC ID number of contributing
federal political committee.

C

Name of Employer
SPACEXOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2025

Transaction ID : AB87B9CDC964B4ADCB10

Amount of Each Receipt this Period

- 3100.00

☒ Memo Item

REDESIGNATION FROM

C.

Full Name (Last, First, Middle Initial)

MUSK, ELON, , ,

Mailing Address PO BOX 341886

City
AUSTINState
TXZip Code
78734-0032FEC ID number of contributing
federal political committee.

C

Name of Employer
SPACEXOccupation
CEO

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2025

Transaction ID : AC6F2EF0A0FB548D9987

Amount of Each Receipt this Period

3100.00

☒ Memo Item

REDESIGNATION TO

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

6600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

OLANDER, DAVID, , ,

A. Mailing Address 12624 WYCKLOW DRCity
CLIFTONState
VAZip Code
20124-1616FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 15 2025

Transaction ID : A71208E0AB5394E34A15

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PARRISH, LEON, M., ,

B. Mailing Address 3 EAGLE RIDGE DRCity
SAVANNAHState
GAZip Code
31406-8421FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN FINANCIALOccupation
PRES. / CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : ABDFD1B3E7EFF4E89AD2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PATEL, RIMA, PRAKASH, ,

C. Mailing Address 221 COUNTRY CLUB RDCity
LIVINGSTONState
ALZip Code
35470-5631FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AB8151983894548B0B08

Amount of Each Receipt this Period

1000.00

☐ Memo Item

3250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

PEEPLES, FRANK, K., , JR.

A. Mailing Address PO BOX 10502City
SAVANNAHState
GAZip Code
31412-0702FEC ID number of contributing
federal political committee.

C

Name of Employer
PEEPLES INDUSTRIES INC.Occupation
MARITIME EXEC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AD75EAB6DD01D4AB48FC

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PREUITT, MICHAEL, W, ,

B. Mailing Address 1385 TABERNACLE RD SECity
HARTSELLEState
ALZip Code
35640-5409FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A3A56AA5B1A5F4E3F855

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RAEDER, MARK, , ,

C. Mailing Address 1216 W GEORGE STCity
CHICAGOState
ILZip Code
60657-4220FEC ID number of contributing
federal political committee.

C

Name of Employer
SUMMIT RIDGE ENERGYOccupation
PRINCIPAL

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 16 2025

Transaction ID : A7EFE7E26AD2A48A9BB0

Amount of Each Receipt this Period

2500.00

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

5250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

REARDON, WILLIAM, A., , SR.

A.

Mailing Address PO BOX 15728

City
SAVANNAHState
GAZip Code
31416-2428FEC ID number of contributing
federal political committee.

C

Name of Employer
TONY REARDON CONSTRUCTION CO., INC.Occupation
CONTRACTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A974D21139C79492D86A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REESE, JOHN, S., ,

B.

Mailing Address PO BOX 23588

City
SAVANNAHState
GAZip Code
31403-3588FEC ID number of contributing
federal political committee.

C

Name of Employer
REESE & COMPANYOccupation
OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AC0E2D6BEA4B846619C7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REYBOLD, GREGORY, V., ,

C.

Mailing Address 3535 VINTAGE TRAIL

City
WOODSTOCKState
GAZip Code
30189-8148FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A781F3A257CAF41159E6

Amount of Each Receipt this Period

500.00

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

2000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

RHUDY, MARILY, , ,

A. Mailing Address 8317 PERSIMMON TREE RD

City

BETHESDA

State

MD

Zip Code

20817-2647

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE CONAFAY GROUPOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A99DDCDAE850643E1BB8

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RITTER, LLOYD, K., ,

B. Mailing Address 31 E LAKE DR

City

ANNAPOLIS

State

MD

Zip Code

21403-4412

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREEN CAPITOL, LLCOccupation
POLICY CONSULTING

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
0	1		2	3		2	0	2	5

Transaction ID : ADF05EAB3882446129A5

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RUSCH, TRAVIS, J., ,

C. Mailing Address 717 PARK LN

City

SULLIVAN

State

IN

Zip Code

47882-7221

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : ABF2C1C1F6C234D63AB8

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

1500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SALGUEIRO, ALEX, , ,

A.

Mailing Address 70 PEREGRINE XING

City

SAVANNAH

State

GA

Zip Code

31411-2897

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A3793D10AB317471293B

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 10 2025

Transaction ID : A8BB7FECC736D472C934

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

SHEAROUSE, WILLIAM, , ,

C.

Mailing Address 1 SEDGEBANKS ROAD

City

SAVANNAH

State

GA

Zip Code

31404

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 28 2025

Transaction ID : A14FD22BB509545EB886

Amount of Each Receipt this Period

100.00

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

200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHEAROUSE, WILLIAM, , ,

A.

Mailing Address 1 SEDGEBANKS ROAD

City
SAVANNAHState
GAZip Code
31404FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : AB4DF8C8BBD75401187B

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

SHEAROUSE, WILLIAM, , ,

Mailing Address 1 SEDGEBANKS ROAD

City
SAVANNAHState
GAZip Code
31404FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2025

Transaction ID : A218C72FB47A145E7B82

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SKAGGS, NATHAN, J., ,

Mailing Address 26751 SUNSTREAM WAY

City
SAN ANTONIOState
TXZip Code
78260-2594FEC ID number of contributing
federal political committee.

C

Name of Employer
PHARMACY UNLIMITEDOccupation
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : ACEAA953303774C928C2

Amount of Each Receipt this Period

2500.00

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

2700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SKOLL, JEFFREY, S., ,

A. Mailing Address 1020 S OCEAN BLVDCity
LANTANAState
FLZip Code
33462-5506FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : A73F8F21BF21141FFBB9

Amount of Each Receipt this Period

1875.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SMITH, ROBERT, BRENT, ,

B. Mailing Address 100 SAINT ANDREWS RDCity
OXFORDState
MSZip Code
38655-2638FEC ID number of contributing
federal political committee.

C

Name of Employer
CHANAY'S PHARMACYOccupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A6C26E11FA5414208805

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SMOCK, DOUGLAS, B., ,

C. Mailing Address 3313 ESSEX DR
STE 200City
RICHARDSONState
TXZip Code
75082-9727FEC ID number of contributing
federal political committee.

C

Name of Employer
INFINITY PHARMACYOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A20256205A9D04E65A1B

Amount of Each Receipt this Period

2500.00

☐ Memo Item

5375.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

STONE, JOHN, , ,

A.

Mailing Address 1401 COVENTRY LN

City

ALEXANDRIA

State

VA

Zip Code

22304-1824

FEC ID number of contributing
federal political committee.

C

Name of Employer
BGR GROUPOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

Transaction ID : AED3DDD5722D84C6E9EF

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STROTHER, GORDON, T., ,

B.

Mailing Address 112 WESTCHESTER

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-2473

FEC ID number of contributing
federal political committee.

C

Name of Employer
JC STRUTHER COOccupation
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	2	5

Transaction ID : A8B345D9A99E142F9B0B

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TAGGART, MICHAEL, H., ,

C.

Mailing Address 213 15TH ST NE

City

WASHINGTON

State

DC

Zip Code

20002-6557

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : A2952A9D2DF8F4BBBA70

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

2000.00

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

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

Use separate schedule(s)
for each category of the
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TERRY, CHAD, , ,

A.

Mailing Address 2716 BARTRAM RD

City

WINSTON SALEM

State

NC

Zip Code

27106-5125

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AE968FEBD09C040658B2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE COGGIN GROUP

B.

Mailing Address 1942 DILTON MANKIN RD

City

MURFREESBORO

State

TN

Zip Code

37127-6902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AD381D4B5FA72417A878

Amount of Each Receipt this Period

1500.00

☐ Memo Item

PENDING VERIFICATION OF FEDERALLY
DEEMED ELECTION

Full Name (Last, First, Middle Initial)

TUCKER, SAMUEL, STEVENS, ,

C.

Mailing Address 181 SAINT CLAIR DR

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-1046

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 17 2025

Transaction ID : A0FE965BD61194A3691F

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

2550.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y
01 27 2025

Transaction ID : A47CEA37326EC4BC1989

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)
TUCKER, SAMUEL, STEVENS, ,

Mailing Address 181 SAINT CLAIR DR

City
SAINT SIMONS ISLANState
GAZip Code
31522-1046FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 21 2025

Transaction ID : AD61688E9B1DF4669BF4

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y
01 27 2025

Transaction ID : AF6E70368C3D149EA90F

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

50.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TUCKER, SAMUEL, STEVENS, ,

A. Mailing Address 181 SAINT CLAIR DRCity
SAINT SIMONS ISLANState
GAZip Code
31522-1046FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 27 2025

Transaction ID : A912488F38F8547C5BE8

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B. Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

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

Transaction ID : ADFA04C3E587A4D40BA5

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

TUCKER, SAMUEL, STEVENS, ,

C. Mailing Address 181 SAINT CLAIR DRCity
SAINT SIMONS ISLANState
GAZip Code
31522-1046FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A10E72C5B467F4010995

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 24 / 2025D D / Y Y Y Y Y
24 / 2025Y Y Y Y Y
2025

Transaction ID : A1BFC782F022E41E28EF

Amount of Each Receipt this Period

50.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

TUCKER, SAMUEL, STEVENS, ,

Mailing Address 181 SAINT CLAIR DR

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-1046

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

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID : A75FA03E89A6D4C34B69

Amount of Each Receipt this Period

50.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

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

Transaction ID : AFAEC53E51AD245DEA50

Amount of Each Receipt this Period

50.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

50.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS**A.** Full Name (Last, First, Middle Initial)
TUCKER, SAMUEL, STEVENS, ,
Mailing Address 181 SAINT CLAIR DRCity
SAINT SIMONS ISLANState
GAZip Code
31522-1046FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIREDReceipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : AC99C70CC39634421B36

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

B. Full Name (Last, First, Middle Initial)
WINRED
Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y
03 10 2025

Transaction ID : A625DA8D67E1F4F07A9D

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**C.** Full Name (Last, First, Middle Initial)
TUCKER, SAMUEL, STEVENS, ,
Mailing Address 181 SAINT CLAIR DRCity
SAINT SIMONS ISLANState
GAZip Code
31522-1046FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIREDReceipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

Transaction ID : AEBD4F927C1044D79BB4

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

Transaction ID : A927E611DD69E4AD78F6

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

TUCKER, SAMUEL, STEVENS, ,

Mailing Address 181 SAINT CLAIR DR

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-1046

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

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	5

Transaction ID : A1CD0C5D0C4034625811

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : A31E9CEDABB4C4A6482D

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

50.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 141	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial) VOIGT, HAROLD, G., ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 28 / 2025
Mailing Address 583 DOVER DR			Transaction ID : A9FC73DC7F5044865A97
City WAVERLY	State GA	Zip Code 31565-2408	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer NONE	Occupation RETIRED	<input type="checkbox"/> Memo Item	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) VOSS, PETER, S., ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 06 / 2025
Mailing Address PO BOX 324			Transaction ID : A8FB101CFB0834D13B1A
City SUNAPEE	State NH	Zip Code 03782-0324	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer NONE	Occupation RETIRED	<input type="checkbox"/> Memo Item	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) WAGNER, JANICE, F., ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 19 / 2025
Mailing Address 260 WHIPPOORWILL CIR			Transaction ID : A2FD68DF129034869ADF
City KINGSLAND	State GA	Zip Code 31548-6448	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer NONE	Occupation RETIRED	<input type="checkbox"/> Memo Item	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional).....▶	570.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y
03 24 2025

Transaction ID : A90FDAE4B818E4975A13

Amount of Each Receipt this Period

20.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)
WALL, BEN, B., , JR.

Mailing Address 125B PINE MEADOW DR

City
POOLERState
GAZip Code
31322-9354FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

ATLANTIC WASTE SERVICES

VICE PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : A27CA3A1E146B4C0FAB7

Amount of Each Receipt this Period

3500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
WALL, KENLEA, W., ,

Mailing Address 209 SCHOONER DR

City
SAVANNAHState
GAZip Code
31410-3419FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : A1E00731601CD47049B6

Amount of Each Receipt this Period

3500.00

☐ Memo Item

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 141

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

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

NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WALL, STEPHEN, E., ,

A.

Mailing Address 305 CARDINAL ST

City
POOLERState
GAZip Code
31322-1708FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

Transaction ID : A4EECB5CC350F477BA06

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WARREN, EDDIE, , ,

B.

Mailing Address 330 SHADOW MOSS CIR

City
RICHMOND HILLState
GAZip Code
31324-7323FEC ID number of contributing
federal political committee.

C

Name of Employer
REMAX ACCENTOccupation
REALTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 23 2025

Transaction ID : A9248BB3A8D6A4FBBA6C

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AA2F51ECFEFF1466DAB8

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

550.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 141

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

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

NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WEBER, ROBERT, E., ,

A. Mailing Address 4 SOUNDING POINT RETREAT

City

SAVANNAH

State

GA

Zip Code

31411-2839

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A8A3820E5B6224D40B6B

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITWORTH, THOMAS, H., ,

B. Mailing Address 3469 W POINT RD

City

LAGRANGE

State

GA

Zip Code

30240-8650

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORLEY AND MCCLENDON DRUGS

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : A2BB70A2B44C2445A9BF

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITWORTH, THOMAS, H., ,

C. Mailing Address 3469 W POINT RD

City

LAGRANGE

State

GA

Zip Code

30240-8650

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORLEY AND MCCLENDON DRUGS

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : AF9DD5A9CE1774A83837

Amount of Each Receipt this Period

1000.00

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

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILKINSON, JOSEPH, B, , JR.

A.

Mailing Address 1605 BRUCE DR

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-3912

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : ADEB010166F144F5EAAE

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

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

Transaction ID : ABD83D9B22A3344DF973

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

WILKINSON, JOSEPH, B, , JR.

Mailing Address 1605 BRUCE DR

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-3912

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : A4E67B5B2CD8B4302A65

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

Transaction ID : AE4C896BA66B94916BEA

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

WOLTMAN, MEGHAN, , ,

Mailing Address 1419 WILLIAM ST

City

RIVER FOREST

State

IL

Zip Code

60305-1136

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

Name of Employer

ADVOCATE HEALTH

Occupation

SVP, CHIEF GOVERNMENT AFFAIRS OFFIC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

Transaction ID : A8B668EE571D54A22BD3

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WOOD, ELLIS, G., ,

Mailing Address P.O. BOX 2041

City

STATESBORO

State

GA

Zip Code

30459-2041

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

Name of Employer

ELLIS WOOD CONSTRUCTION CO.

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	2	5

Transaction ID : A05CB9A4EF1204B51A89

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

750.00

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

117742.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACADEMY OF NUTRITION AND DIETETICS PAC

Mailing Address 1120 CONNECTICUT AVE NW
STE 480City
WASHINGTONState
DCZip Code
20036-3989FEC ID number of contributing
federal political committee.

C C00143560

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A4C04E705D18E4F1C92B

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ADVANCED MEDICAL TECHNOLOGY ASSOCIATION PAC

Mailing Address 701 PENNSYLVANIA AVE NW
STE 800City
WASHINGTONState
DCZip Code
20004-2654FEC ID number of contributing
federal political committee.

C C00340356

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 27 2025

Transaction ID : A21BA5F437E814CFAB62

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AGRICULTURAL RETAILERS ASSOCIATION PAC

Mailing Address 1156 15TH STREET, NW
SUITE 500City
WASHINGTONState
DCZip Code
20005FEC ID number of contributing
federal political committee.

C C00264770

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A25009EF9F1F7497EB24

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

10000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALLEGIAN TRAVEL COMPANY PAC

Mailing Address 1201 N TOWN CENTER DR

City
LAS VEGASState
NVZip Code
89144-6307FEC ID number of contributing
federal political committee.**C** C00516039

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2025

Transaction ID : A3F80FD8C12EF4AF79D0

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALLIANCE FOR PHARMACY COMPOUNDING PAC (COMP PAC)Mailing Address 100 DAINGERFIELD RD
STE 401City
ALEXANDRIAState
VAZip Code
22314-2886FEC ID number of contributing
federal political committee.**C** C00424143

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A81563B3F5694453B8B3

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALLIANCE FOR REGENERATIVE MEDICINE PAC ARM PACMailing Address 28 LIBERTY SHIP WAY
STE 2815City
SAUSALITOState
CAZip Code
94965-3321FEC ID number of contributing
federal political committee.**C** C00571695

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2025

Transaction ID : AD8C14545D62247BFBB7

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

10000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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			15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALSTON & BIRD PAC

A.Mailing Address THE ATLANTIC BUILDING
950 F STREET, NWCity
WASHINGTONState
DCZip Code
20004-1438FEC ID number of contributing
federal political committee.**C** C00395723

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A87D2C70F86E2487B9D5

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION PAC (SKINPAC)

B.Mailing Address 1201 PENNSYLVANIA AVE NW
STE 540City
WASHINGTONState
DCZip Code
20004-2463FEC ID number of contributing
federal political committee.**C** C00359539

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A798A633C27024A0299E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF FAMILY PHYSICIANS PAC

C.Mailing Address 1133 CONNECTICUT AVE NW
STE 1100City
WASHINGTONState
DCZip Code
20036-4342FEC ID number of contributing
federal political committee.**C** C00411553

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AD1B0638F75FE4E549CF

Amount of Each Receipt this Period

2500.00

☐ Memo Item

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF FAMILY PHYSICIANS PAC**A.**Mailing Address 1133 CONNECTICUT AVE NW
STE 1100

City

WASHINGTON

State

DC

Zip Code

20036-4342

FEC ID number of contributing
federal political committee.**C** C00411553

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

03 / 03 / 2025

2025

Transaction ID : ACF60163096004823BB1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)**B.**

Mailing Address 655 BEACH ST

City

SAN FRANCISCO

State

CA

Zip Code

94109-1342

FEC ID number of contributing
federal political committee.**C** C00196246

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2025

17 / 17 / 2025

2025

Transaction ID : A9522A1441FE3410D9C5

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)**C.**

Mailing Address 655 BEACH ST

City

SAN FRANCISCO

State

CA

Zip Code

94109-1342

FEC ID number of contributing
federal political committee.**C** C00196246

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2025

31 / 31 / 2025

2025

Transaction ID : A90A751793C7841309E7

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)**A.**

Mailing Address 1201 WILSON BLVD

FL 27

City

ARLINGTON

State

VA

Zip Code

22209-2337

FEC ID number of contributing
federal political committee.**C** C00168070

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2025

Transaction ID : ACE78562540C047D3930

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF CHILD & ADOLESCENT PSYCHIATRY PAC (AACAP-PAC)**B.**

Mailing Address 3615 WISCONSIN AVE NW

City

WASHINGTON

State

DC

Zip Code

20016-3007

FEC ID number of contributing
federal political committee.**C** C00567883

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2025

Transaction ID : A973E33F576564B2CA24

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF NURSE PRACTITIONERS PAC**C.**

Mailing Address PO BOX 12846

City

AUSTIN

State

TX

Zip Code

78711-2846

FEC ID number of contributing
federal political committee.**C** C00358903

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2025

Transaction ID : AE0F316A12BEF46EAAD7

Amount of Each Receipt this Period

5000.00

☐ Memo Item

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**A.**Mailing Address 1120 CONNECTICUT AVE NW
STE 600City
WASHINGTONState
DCZip Code
20036-3971FEC ID number of contributing
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : AD344512E16004807981

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN CAR RENTAL ASSOCIATION PAC**B.**

Mailing Address P.O. BOX 584

City
LONG LAKEState
NYZip Code
12847-0584FEC ID number of contributing
federal political committee.**C** C00612010

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		28		2025

Transaction ID : A457620ED7E624429A43

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN CHIROPRACTIC ASSOCIATION PAC**C.**

Mailing Address 1701 CLARENDON BLVD

City
ARLINGTONState
VAZip Code
22209-2799FEC ID number of contributing
federal political committee.**C** C00102764

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : AD8AD934A7AFD49EE816

Amount of Each Receipt this Period

3000.00

☐ Memo Item

7500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN COLLEGE OF CARDIOLOGY PAC

A.

Mailing Address 2400 N ST NW

City

WASHINGTON

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.**C** C00375360

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025D D / Y Y Y Y Y
31 / 2025Y Y Y Y Y
2025

Transaction ID : A5B7FF2ED82744C11AFB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN COLLEGE OF PHYSICIAN SERVICES INC PAC; AKA ACP SERVICES PAC

B.Mailing Address 25 MASSACHUSETTS AVE NW
STE 700

City

WASHINGTON

State

DC

Zip Code

20001-7401

FEC ID number of contributing
federal political committee.**C** C00403881

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025D D / Y Y Y Y Y
31 / 2025Y Y Y Y Y
2025

Transaction ID : A2BB49BC738A6456E908

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN COLLEGE OF RHEUMATOLOGY (RHEUMPAC)

C.

Mailing Address 2200 LAKE BLVD NE

City

BROOKHAVEN

State

GA

Zip Code

30319-5310

FEC ID number of contributing
federal political committee.**C** C00432823

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 19 / 2025D D / Y Y Y Y Y
19 / 2025Y Y Y Y Y
2025

Transaction ID : A293F394B59C84ECCA42

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

8500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC**A.**Mailing Address 20 F ST NW
STE 1000City
WASHINGTONState
DCZip Code
20001-6701FEC ID number of contributing
federal political committee.**C** C00382424

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A9F11D3B611764730976

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC**B.**Mailing Address 20 F ST NW
STE 1000City
WASHINGTONState
DCZip Code
20001-6701FEC ID number of contributing
federal political committee.**C** C00382424

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A278DE9AEB8C94FD9A46

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN GASTROENTEROLOGICAL ASSOCIATION INC. PAC**C.**

Mailing Address 4926 DEL RAY AVE

City
BETHESDAState
MDZip Code
20814-2512FEC ID number of contributing
federal political committee.**C** C00423228

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A115E2648600E45268DC

Amount of Each Receipt this Period

2500.00

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

6000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2025	
Mailing Address 220 LEIGH FARM RD PALLADIAN 1			Transaction ID : AA98486777BEF451A815	
City DURHAM	State NC	Zip Code 27707-8110	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C C00077321		Memo Item <input type="checkbox"/>		
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 3000.00		
B. Full Name (Last, First, Middle Initial) AMERICAN MEDICAL ASSOCIATION PAC			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2025	
Mailing Address 25 MASSACHUSETTS AVE NW STE 600			Transaction ID : A3791750A0BCA4952BE5	
City WASHINGTON	State DC	Zip Code 20001-7400	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00000422		Memo Item <input type="checkbox"/>		
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 5000.00		
C. Full Name (Last, First, Middle Initial) AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY PAC (PT-PAC)			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2025	
Mailing Address 1111 N FAIRFAX ST			Transaction ID : A166923B3313C41EEB2B	
City ALEXANDRIA	State VA	Zip Code 22314-1484	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00012880		Memo Item <input type="checkbox"/>		
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 10000.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			13000.00	
TOTAL This Period (last page this line number only)..... ▶				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY PAC (PT-PAC)

A.

Mailing Address 1111 N FAIRFAX ST

City

ALEXANDRIA

State

VA

Zip Code

22314-1484

FEC ID number of contributing
federal political committee.**C** C00012880

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A88D5B3699A5F4092BBA

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN PILOTS' ASSOCIATION PAC

B.Mailing Address 499 S CAPITOL ST SW
STE 409

City

WASHINGTON

State

DC

Zip Code

20003-4023

FEC ID number of contributing
federal political committee.**C** C00041061

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A7C4AD1F6FA7A49D3ADB

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN PSYCHIATRIC ASSOCIATION PAC

C.Mailing Address 800 MAINE AVE SW
STE 900

City

WASHINGTON

State

DC

Zip Code

20024-2812

FEC ID number of contributing
federal political committee.**C** C00373696

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A4B999287FA1A4275B31

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

9500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY FOR RADIATION ONCOLOGY PAC ("ASTRO-PAC")**A.**

Mailing Address 251 18TH ST S

FL 8

City

ARLINGTON

State

VA

Zip Code

22202-3531

FEC ID number of contributing
federal political committee.**C** C00384602

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : AAA289DC599D34772A3E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC**B.**

Mailing Address 1061 AMERICAN LN

City

SCHAUMBURG

State

IL

Zip Code

60173-4973

FEC ID number of contributing
federal political committee.**C** C00255752

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : AA356A7FF70C04EEE87D

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF HEALTH SYSTEM PHARMACIST - PAC**C.**Mailing Address 4500 E WEST HWY
STE 900

City

BETHESDA

State

MD

Zip Code

20814-3417

FEC ID number of contributing
federal political committee.**C** C00245530

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : A25D3DEA5BCE14DD7A47

Amount of Each Receipt this Period

2500.00

☐ Memo Item

5000.00

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

SCHEDULE A (FEC Form 3)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN UROLOGICAL ASSOCIATION, INC. PAC (AUAPAC)

Mailing Address 1000 CORPORATE BLVD

City
LINTHICUMState
MDZip Code
21090-2260FEC ID number of contributing
federal political committee.**C** C00691741

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A100A35FCC1824929A45

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMGEN INC. PACMailing Address 601 13TH ST NW
STE 1100City
WASHINGTONState
DCZip Code
20005-3822FEC ID number of contributing
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A999108D14A784B7EBF4

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMGEN INC. PACMailing Address 601 13TH ST NW
STE 1100City
WASHINGTONState
DCZip Code
20005-3822FEC ID number of contributing
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A977CDB8FB02240B1883

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ARDELYX, INC. PAC (ARDX PAC)

Mailing Address 400 5TH AVE
STE 210City
WALTHAMState
MAZip Code
02451-8706FEC ID number of contributing
federal political committee.

C C00868885

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 24 2025

Transaction ID : AB47CE92C8FB549609B8

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ARGENTUM'S SILVER PAC

Mailing Address 1650 KING ST
STE 602City
ALEXANDRIAState
VAZip Code
22314-2747FEC ID number of contributing
federal political committee.

C C00338020

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : AF876CA1454934DE1A40

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ASCO ASSOCIATION PAC (ASCO ASSOCIATION PAC)

Mailing Address 2318 MILL RD
STE 800City
ALEXANDRIAState
VAZip Code
22314-6834FEC ID number of contributing
federal political committee.

C C00734012

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : AC6F5F32C9A3046ACA26

Amount of Each Receipt this Period

1000.00

☐ Memo Item

6000.00

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

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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			15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ASTELLAS US LLC PAC (ASTELLAS PAC)

Mailing Address 2375 WATERVIEW DR

City
NORTHBROOKState
ILZip Code
60062-6145FEC ID number of contributing
federal political committee.

C C00444885

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A12ED1286C07D4E43B8F

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AVANGRID PAC

Mailing Address 607 14TH ST NW
STE 540City
WASHINGTONState
DCZip Code
20005-2096FEC ID number of contributing
federal political committee.

C C00406801

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : AF7468AC47FCC4A1EA54

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BALCH & BINGHAM LLP PAC

Mailing Address 1901 LTH AVE N, STE 1500

City
BIRMINGHAMState
ALZip Code
35203FEC ID number of contributing
federal political committee.

C C00358440

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A1C4EDF1EA7984131B8F

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

11000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BASF CORPORATION EMPLOYEES PAC**A.** Mailing Address 100 PARK AVENUE

City

FLORHAM PARK

State

NJ

Zip Code

07932

FEC ID number of contributing
federal political committee.**C** C00340075

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : AAB43505DB4A94407BE0

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. **BAYER CORPORATION PAC**

Mailing Address 100 BAYER RD

City

PITTSBURGH

State

PA

Zip Code

15205-9707

FEC ID number of contributing
federal political committee.**C** C00281162

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : A838FE6EC9CAC42BFBB8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. **BIOMARIN PHARMACEUTICAL INC. PAC AKA BIOMARIN PAC**Mailing Address 2350 KERNER BLVD
STE 250

City

SAN RAFAEL

State

CA

Zip Code

94901-5596

FEC ID number of contributing
federal political committee.**C** C00543371

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : AB3184708ACE549B8A70

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

8500.00

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

SCHEDULE A (FEC Form 3)
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BIOTECHNOLOGY INNOVATION ORGANIZATION PAC (BIO PAC)**A.**Mailing Address 1201 MARYLAND AVE SW
STE 900City
WASHINGTONState
DCZip Code
20024-6129FEC ID number of contributing
federal political committee.**C** C00355677

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2025

Transaction ID : AC6A975ED908F49BE96E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRISTOL-MYERS SQUIBB COMPANY PAC (BMS PAC)**B.**

Mailing Address 3401 PRINCETON PIKE

City
LAWRENCEVILLEState
NJZip Code
08648-1205FEC ID number of contributing
federal political committee.**C** C00035675

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AF07890247FAD412BA82

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CATERPILLAR INC. POLITICAL ACTION COMMITTEE (CATPAC)**C.**

Mailing Address 100 NE ADAMS ST

City
PEORIAState
ILZip Code
61629-0001FEC ID number of contributing
federal political committee.**C** C00148031

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : ADA4197ED567F4F35BBC

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

9000.00

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

SCHEDULE A (FEC Form 3)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CENCORA, INC. PAC

A.

Mailing Address 1 W 1ST AVE

City
CONSHOHOCKENState
PAZip Code
19428-1800FEC ID number of contributing
federal political committee.**C** C00400929

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A5D6E0AD2CAE9439E9BF

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CENCORA, INC. PAC

Mailing Address 1 W 1ST AVE

City
CONSHOHOCKENState
PAZip Code
19428-1800FEC ID number of contributing
federal political committee.**C** C00400929

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A22B2471FF86744EC969

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 1350 I ST NW
STE 590City
WASHINGTONState
DCZip Code
20005-3305FEC ID number of contributing
federal political committee.**C** C00274944

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : AA0DFDCEF81EF4092AB3

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

12000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVITA HEALTHCARE PARTNERS, INC. POLITICAL ACTION COMMITTEE (DAPAC)

A.

Mailing Address 32275 32ND AVE S

City

FEDERAL WAY

State

WA

Zip Code

98001-9616

FEC ID number of contributing
federal political committee.**C** C00340943

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	5	

Transaction ID : A9CFD60C739A64A5AA37

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

DELTA AIR LINES PAC

Mailing Address 1212 NEW YORK AVE NW
STE 200

City

WASHINGTON

State

DC

Zip Code

20005-6609

FEC ID number of contributing
federal political committee.**C** C00104802

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	5	

Transaction ID : AA9C5D2277596493FBA6

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

DELTA AIR LINES PAC

Mailing Address 1212 NEW YORK AVE NW
STE 200

City

WASHINGTON

State

DC

Zip Code

20005-6609

FEC ID number of contributing
federal political committee.**C** C00104802

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	5	

Transaction ID : AEC5E3812B090474B8B1

Amount of Each Receipt this Period

5000.00

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

11000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EYEPAC PAC FOR AMERICAN SOCIETY OF CATARACT AND REFRACTIVE SURGERY**A.**Mailing Address 12587 FAIR LAKES CIR
348City
FAIRFAXState
VAZip Code
22033-3822FEC ID number of contributing
federal political committee.**C** C00171504

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		19		2025

Transaction ID : AE79620ACF49D48F18CB

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRIENDS OF COMMUNITY ONCOLOGY PAC**B.**Mailing Address 760 LYNNHAVEN PKWY
STE 150City
VIRGINIA BEACHState
VAZip Code
23452-7492FEC ID number of contributing
federal political committee.**C** C00383976

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		17		2025

Transaction ID : A51690F8331144417B79

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GENERAL MOTORS COMPANY PAC (GM PAC)**C.**Mailing Address 25 MASSACHUSETTS AVE NW
STE 400City
WASHINGTONState
DCZip Code
20001-1427FEC ID number of contributing
federal political committee.**C** C00076810

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : A0B277CD7AA9C4B2E9C6

Amount of Each Receipt this Period

3000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

8500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GEORGIA POWER COMPANY FEDERAL PAC**A.**

Mailing Address 241 RALPH MCGILL BLVD NE

City
ATLANTAState
GAZip Code
30308-3374FEC ID number of contributing
federal political committee.**C** C00119776

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2025

Transaction ID : ABF2CFB3B493941B5A80

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GLAXOSMITHKLINE LLC PAC (GSK PAC)**B.**Mailing Address 5 MOORE DR
PO BOX 13358City
DURHAMState
NCZip Code
27709-0143FEC ID number of contributing
federal political committee.**C** C00199703

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2025

Transaction ID : A69EB98A8ABF84091902

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEALTHCARE DISTRIBUTION ALLIANCE PAC**C.**Mailing Address 901 N GLEBE RD
STE 1000City
ARLINGTONState
VAZip Code
22203-1854FEC ID number of contributing
federal political committee.**C** C00247569

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2025

Transaction ID : ADA9D8F097A7A48DCA8C

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

8500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT**A.**Mailing Address 800 17TH ST NW
STE 1100City
WASHINGTONState
DCZip Code
20006-3962FEC ID number of contributing
federal political committee.**C** C00171330

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		17		2025

Transaction ID : A60D960AC5FCC41499C4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HY-VEE EMPLOYEES PAC**B.**

Mailing Address 5820 WESTOWN PKWY

City
WEST DES MOINESState
IAZip Code
50266-8223FEC ID number of contributing
federal political committee.**C** C00243659

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AC47873260DDD443DB24

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JOHNSON & JOHNSON PAC**C.**

Mailing Address 1 JOHNSON AND JOHNSON PLZ

City
NEW BRUNSWICKState
NJZip Code
08933-0001FEC ID number of contributing
federal political committee.**C** C00010983

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		24		2025

Transaction ID : AA3FB10AF8DA54AEB992

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

8500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHNSON & JOHNSON PAC**A.**

Mailing Address 1 JOHNSON AND JOHNSON PLZ

City

NEW BRUNSWICK

State

NJ

Zip Code

08933-0001

FEC ID number of contributing
federal political committee.**C** C00010983

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2025

Transaction ID : AA2BEC5E71844AE59EC

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MAXIMUS INC PAC (MAXPAC)

Mailing Address 1891 METRO CENTER DR

City

RESTON

State

VA

Zip Code

20190-5287

FEC ID number of contributing
federal political committee.**C** C00343707

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025

Transaction ID : AF7C86E2CCF5848E69A6

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

MERCK & CO., INC., EMPLOYEES PAC (MERCK PAC)Mailing Address 601 PENNSYLVANIA AVE NW
NORTH BUILDING, SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.**C** C00097485

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025

Transaction ID : A52672CC6A7D54C5B8E3

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

12000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. POLITICAL ACTION COMMITTEE

A. Mailing Address 1776 WILSON BLVDCity
ARLINGTONState
VAZip Code
22209-2515FEC ID number of contributing
federal political committee.**C** C00022368

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : AE74E971ECAFA441AFB8D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. POLITICAL ACTION COMMITTEE

B. Mailing Address 1776 WILSON BLVDCity
ARLINGTONState
VAZip Code
22209-2515FEC ID number of contributing
federal political committee.**C** C00022368

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A0A5A048F816447D0917

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF SPECIALTY PHARMACY PAC

C. Mailing Address 300 NEW JERSEY AVE NW
STE 900City
WASHINGTONState
DCZip Code
20001-2271FEC ID number of contributing
federal political committee.**C** C00682641

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AF81146AFB6E242FCA12

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF SPECIALTY PHARMACY PAC**A.**Mailing Address 300 NEW JERSEY AVE NW
STE 900City
WASHINGTONState
DCZip Code
20001-2271FEC ID number of contributing
federal political committee.**C** C00682641

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A4B78DFB44F1448CFAD7

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL CHICKEN COUNCIL POLITICAL ACTION COMMITTEE**B.**Mailing Address 1152 15TH ST NW
STE 430City
WASHINGTONState
DCZip Code
20005-1790FEC ID number of contributing
federal political committee.**C** C00034272

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AF41D7AFC06584403B60

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**C.**

Mailing Address 100 DAINGERFIELD RD

City
ALEXANDRIAState
VAZip Code
22314-2886FEC ID number of contributing
federal political committee.**C** C00030809

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A710AC052314141E2AD2

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

7500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL EMERGENCY MEDICINE PAC (NEMPAC)**A.**

Mailing Address PO BOX 619911

City

DALLAS

State

TX

Zip Code

75261-9911

FEC ID number of contributing
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : ADD251C9A0DD44F0EA4D

Amount of Each Receipt this Period

1500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

NATIONAL FISHERIES INSTITUTE (FISHPAC)Mailing Address 7918 JONES BRANCH DR
STE 700

City

MCLEAN

State

VA

Zip Code

22102-3319

FEC ID number of contributing
federal political committee.**C** C00101204

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : A922F9B15DA2A43C09E5

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NEXTERA ENERGY, INC. PACMailing Address 801 PENNSYLVANIA AVE NW
STE 220

City

WASHINGTON

State

DC

Zip Code

20004-2679

FEC ID number of contributing
federal political committee.**C** C00064774

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : A643939F2423848F0A19

Amount of Each Receipt this Period

2000.00

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

6000.00

SCHEDULE A (FEC Form 3)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

NEXTERA ENERGY, INC. PAC

A.

Mailing Address 801 PENNSYLVANIA AVE NW
STE 220City
WASHINGTONState
DCZip Code
20004-2679FEC ID number of contributing
federal political committee.

C C00064774

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2025

Transaction ID : A405F14D05FE14BC1810

Amount of Each Receipt this Period

3000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

PAC OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS--PAC OF AAOS

Mailing Address 317 MASSACHUSETTS AVE NE
FL 1City
WASHINGTONState
DCZip Code
20002-5769FEC ID number of contributing
federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : A4B849672337648B7999

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

PAC OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS--PAC OF AAOS

Mailing Address 317 MASSACHUSETTS AVE NE
FL 1City
WASHINGTONState
DCZip Code
20002-5769FEC ID number of contributing
federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : AEDF9982832E748B2A0D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

5000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

PAIN FREE AMERICA, THE PAC OF ATHLETICO HOLDINGS, LLC**A.**Mailing Address 2122 YORK RD
STE 300City
OAK BROOKState
ILZip Code
60523-1925FEC ID number of contributing
federal political committee.**C** C00760660

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : A1B8CB3678C04499FA4F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

POLSINELLI PAC**B.**Mailing Address 1401 I ST NW
STE 800City
WASHINGTONState
DCZip Code
20005-2295FEC ID number of contributing
federal political committee.**C** C00445981

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : A988A1ACAC8D34C94A55

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRICEWATERHOUSECOOPERS PAC I**C.**Mailing Address 600 13TH ST NW
STE 1000City
WASHINGTONState
DCZip Code
20005-3005FEC ID number of contributing
federal political committee.**C** C00107235

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A0CA5D4CCCB9C461A8AF

Amount of Each Receipt this Period

3000.00

☐ Memo Item

6500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

PRIME POLICY GROUP LLC/BURSON COHN & WOLFE PAC**A.**Mailing Address 1801 K ST NW
STE 9000City
WASHINGTONState
DCZip Code
20006-1301FEC ID number of contributing
federal political committee.**C** C00201863

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 21 / 2025

Transaction ID : A5E247D1596F744B7A2A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REPUBLICAN GOVERNANCE GROUP/TUESDAY GROUP PAC**B.**

Mailing Address 610 S BOULEVARD

City
TAMPAState
FLZip Code
33606-2647FEC ID number of contributing
federal political committee.**C** C00433060

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A5F404EE8D8C74D72B7B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REPUBLICAN GOVERNANCE GROUP/TUESDAY GROUP PAC**C.**

Mailing Address 610 S BOULEVARD

City
TAMPAState
FLZip Code
33606-2647FEC ID number of contributing
federal political committee.**C** C00433060

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2025

Transaction ID : ABA26D836A4BF4F13A31

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

REPUBLICAN MAINSTREET PARTNERSHIP PAC**A.** Mailing Address 411 FIRST STREET SE

City

WASHINGTON

State

DC

Zip Code

20003-1827

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

C00165159

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A85718E3DDC4B4B9A993

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED**B.** Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8138.37

Date of Receipt

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

Transaction ID : A25A92D42FECB41A2AB2

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

REPUBLICAN MAINSTREET PARTNERSHIP PAC**C.** Mailing Address 411 FIRST STREET SE

City

WASHINGTON

State

DC

Zip Code

20003-1827

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

C00165159

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2025

Transaction ID : A017F3E7A65B5417FBD7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

RESCARE, INC. DBA BRIGHTSPRING HEALTH SERVICES LEGACY FUND (BRIGHTSPRING LEGACY FUND)

A.Mailing Address 657 S HURSTBOURNE PKWY
267City
LOUISVILLEState
KYZip Code
40222-5095FEC ID number of contributing
federal political committee.**C** C00344663

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A5D651C5D44FB45B7BD2

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

RESOLUTE FOREST PRODUCTS INC. PAC AKA DOMTAR PAC

Mailing Address 1950 ROLAND CLARKE PL
STE 300City
RESTONState
VAZip Code
20191-1414FEC ID number of contributing
federal political committee.**C** C00350884

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A4425A426688B49A6A41

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

REYNOLDS AMERICAN INC. PAC; RAI PAC

Mailing Address P. O. BOX 718

City
WINSTON SALEMState
NCZip Code
27102-0718FEC ID number of contributing
federal political committee.**C** C00042002

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : A527395C1B9C149DDA81

Amount of Each Receipt this Period

2500.00

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

6000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SAREPTA THERAPEUTICS, INC. PAC (SAREPTA PAC)**A.**Mailing Address C/O 28 LIBERTY SHIP WAY
SUITE 2815City
SAUSALITOState
CAZip Code
94965FEC ID number of contributing
federal political committee.**C** C00850339

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	D D	Y Y Y Y
03	31	2025

Transaction ID : AB2B81B0421534E628D2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SENIOR CARE PHARMACY COALITION PAC**B.**Mailing Address 1700 PENNSYLVANIA AVE NW
STE 200City
WASHINGTONState
DCZip Code
20006-4700FEC ID number of contributing
federal political committee.**C** C00615203

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	D D	Y Y Y Y
02	06	2025

Transaction ID : A5808E910BC3E4E28ACB

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SWEDISH MATCH NORTH AMERICA LLC PAC**C.**Mailing Address 1021 E CARY ST
STE 1600City
RICHMONDState
VAZip Code
23219-4000FEC ID number of contributing
federal political committee.**C** C00215053

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	D D	Y Y Y Y
03	31	2025

Transaction ID : A4DD1239284BD47B5B24

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

11000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TEXTILE RENTAL SERVICES ASSOCIATION OF AMERICA PAC (TRSA PAC)**A.**Mailing Address 1800 DIAGONAL RD
STE 200City
ALEXANDRIAState
VAZip Code
22314-2842FEC ID number of contributing
federal political committee.**C** C00279828

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
03		31		2025

Transaction ID : A4824A1DEB3AF49D9884

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**B.**Mailing Address 1155 F ST NW
STE 400City
WASHINGTONState
DCZip Code
20004-1346FEC ID number of contributing
federal political committee.**C** C00284885

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
03		28		2025

Transaction ID : A27606539744A4BAEB81

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE KROGER CO. PAC**C.**

Mailing Address 1014 VINE ST

City
CINCINNATIState
OHZip Code
45202-1141FEC ID number of contributing
federal political committee.**C** C00059238

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AE58B2DA2411B43F185F

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

11000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE KROGER CO. PAC

A.

Mailing Address 1014 VINE ST

City
CINCINNATIState
OHZip Code
45202-1141FEC ID number of contributing
federal political committee.**C** C00059238

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		17		2025

Transaction ID : A4F6A27FCBAA54FA0A1B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICATION (A...

B.

Mailing Address 4301 WILSON BLVD

City
ARLINGTONState
VAZip Code
22203-4419FEC ID number of contributing
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A8C29EFE9C96F43F59F7

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE WILLIAMS COMPANIES, INC. PAC

C.Mailing Address 1 ONE WILLIAMS CTR
FL 47City
TULSAState
OKZip Code
74172-0140FEC ID number of contributing
federal political committee.**C** C00040394

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : AF42B1CCBBC1148138E1

Amount of Each Receipt this Period

1500.00

☐ Memo Item

7500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

T-MOBILE USA, INC. PAC (T-PAC)

A.Mailing Address 601 PENNSYLVANIA AVE NW
STE 800City
WASHINGTONState
DCZip Code
20004-2710FEC ID number of contributing
federal political committee.**C** C00361758

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : A94DA47FCE2E9415BA9F

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

U.S. ANESTHESIA PARTNERS, INC. PAC D/B/A/ USAP PAC

B.Mailing Address 12222 MERIT DRIVE
SUITE 700City
DALLASState
TXZip Code
75251FEC ID number of contributing
federal political committee.**C** C00574103

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AD005A15615DD42B8BCA

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

U.S. TRAVEL ASSOCIATION PAC

C.Mailing Address 1100 NEW YORK AVE NW
STE 450WCity
WASHINGTONState
DCZip Code
20005-3934FEC ID number of contributing
federal political committee.**C** C00457754

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : ADE692062A8E5473B9A4

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

7500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS**A.**

Full Name (Last, First, Middle Initial)

ULTRAGENYX PHARMACEUTICAL INC. PAC (AKA ULTRAGENYX PAC)

Mailing Address 60 LEVERONI COURT

City
NOVATOState
CAZip Code
94949FEC ID number of contributing
federal political committee.**C** C00832006

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : A79B94ADA15E549AAAD9

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

UNITED HEALTH SERVICES PAC, INC.

Mailing Address 211 E DOYLE ST

City
TOCCOAState
GAZip Code
30577-2960FEC ID number of contributing
federal political committee.**C** C00400135

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : A0311B5C856DB418CA6F

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

VIATRIS INC. PAC (VIAPAC)Mailing Address 660 N CAPITOL ST NW
STE 600City
WASHINGTONState
DCZip Code
20001-7417FEC ID number of contributing
federal political committee.**C** C00332395

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

Transaction ID : A4E5CF5B4E2394577AB5

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

10000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESSFull Name (Last, First, Middle Initial)
VIATRIS INC. PAC (VIAPAC)Mailing Address 660 N CAPITOL ST NW
STE 600City
WASHINGTONState
DCZip Code
20001-7417FEC ID number of contributing
federal political committee.

C C00332395

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

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

Transaction ID : A7585693733B947DCBF8

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
WALDEN FOR CONGRESS

Mailing Address PO BOX 1091

City
HOOD RIVERState
ORZip Code
97031-0037FEC ID number of contributing
federal political committee.

C C00333427

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A59E4D9CB3AD14BD2A2A

Amount of Each Receipt this Period

2000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8TH ST

City
BENTONVILLEState
ARZip Code
72716-6209FEC ID number of contributing
federal political committee.

C C00093054

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A86965E0F99814FA691D

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

5500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. PAC

A.

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City

WASHINGTON

State

DC

Zip Code

20005-2273

FEC ID number of contributing
federal political committee.**C** C00147173

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A562C28D2F9AC4077A80

Amount of Each Receipt this Period

2000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period



Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period



Memo Item

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

2000.00

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

289000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TEAM BUDDY

A.Mailing Address 824 S. MILLEDGE AVE
SUITE 101City
ATHENSState
GAZip Code
30605-1332FEC ID number of contributing
federal political committee.

C C00726802

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11561.91

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2025

Transaction ID : AF7E48F8DF0324E01B90

Amount of Each Receipt this Period

11561.91

☐ Memo Item

TRANSFER OF NET JFC FUNDS

Full Name (Last, First, Middle Initial)

MENOTTI, ALEX, , ,

B.

Mailing Address 2123 CHAPEL VALLEY LANE

City
TIMONIUMState
GAZip Code
11093FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 08 / 2024

Transaction ID : A2220972829794277902

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MOSLEY, BETH, , ,

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2024

Transaction ID : AE49DE1828BF548D8A64

Amount of Each Receipt this Period

2753.80

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

11561.91

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHUTTER, EDWARD, , ,

A. Mailing Address 318 ROLLING ROCK RD SECity
MARIETTAState
GAZip Code
30067-4646FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 24 2024

Transaction ID : A4130E5D2789A4631A5C

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

COHERUS BIOSCIENCES PAC

B. Mailing Address 333 TWIN DOLPHIN DR
STE 600City
REDWOOD CITYState
CAZip Code
94065-1442FEC ID number of contributing
federal political committee.

C C00789370

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 30 2024

Transaction ID : AE8680248D0C84533B96

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

KEMP, KELVIN, , ,

C. Mailing Address 522 DUNHAM MARSH TRLCity
RICHMOND HILLState
GAZip Code
31324-5083FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 01 2024

Transaction ID : AE2FC7F4B647E49E0BFE

Amount of Each Receipt this Period

100.00

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

NULL, WILLIAM, , ,

A.

Mailing Address 1201 W PEACHTREE ST NW

STE 300

City

ATLANTA

State

GA

Zip Code

30309-3494

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	2	4

Transaction ID : A7002066CAD624150994

Amount of Each Receipt this Period

2000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

LEWIS, WALTER, , ,

B.

Mailing Address 9505 ABERCORN ST

City

SAVANNAH

State

GA

Zip Code

31406-4559

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	2	4

Transaction ID : A8C9136234F2B495F8E3

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

KRIMBILL, H, MICHAEL, ,

C.

Mailing Address 5620 E 114TH ST

City

TULSA

State

OK

Zip Code

74137-8100

FEC ID number of contributing
federal political committee.

C

Name of Employer

NGL ENERGY

Occupation

CEO

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	2	4

Transaction ID : A30D7504C882D4FABA29

Amount of Each Receipt this Period

3300.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 91 OF 141	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full) BUDDY CARTER FOR CONGRESS
--

Full Name (Last, First, Middle Initial) ROBBINS, DAVID, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 07 2024	
Mailing Address 1000 N LAKE WAY			Transaction ID : A916039E55B5F4FB6B5A	
City PALM BEACH	State FL	Zip Code 33480-3252	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer PIVOTAL MANUFACTURING		Occupation FOUNDER		
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date .00		

Full Name (Last, First, Middle Initial) ABBOTT, KENT, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 15 2024	
Mailing Address 508 N BLAKE AVE APT 2712			Transaction ID : A85E4579298EB47F9A4B	
City HYDRO	State OK	Zip Code 73048-8639	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer PHARMCAREUSA		Occupation PHARMACIST		
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date .00		

Full Name (Last, First, Middle Initial) BINDLEY, WILLIAM, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 05 2024	
Mailing Address 4301 CUTLASS LN			Transaction ID : A50B0F9E6C21549488A9	
City NAPLES	State FL	Zip Code 34102-7943	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer BINDLEY CAPITAL PARTNERS		Occupation CHAIRMAN		
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date .00		

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WESLEY, RICHARD, D., ,

A.

Mailing Address 106 MILLWARD CT

City

SAVANNAH

State

GA

Zip Code

31410-4101

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 19 2024

Transaction ID : A3625C7B604DA4717885

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

TEAM BUDDY

B.Mailing Address 824 S. MILLEDGE AVE
SUITE 101

City

ATHENS

State

GA

Zip Code

30605-1332

FEC ID number of contributing
federal political committee.

C C00726802

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

118237.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A5AE85276D57742BABE7

Amount of Each Receipt this Period

25573.41

☐ Memo Item

TRANSFER OF NET JFC FUNDS

Full Name (Last, First, Middle Initial)

PROFESSIONAL COMPOUNDING CENTERS OF AMERICA PAC

C.

Mailing Address 9901 S WILCREST DR.

City

HOUSTON

State

TX

Zip Code

77099

FEC ID number of contributing
federal political committee.

C C00558452

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : A7310099A7200420FB8E

Amount of Each Receipt this Period

5000.00

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

25573.41

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KALLAY II, E WYNN, , ,

A.

Mailing Address 811 CHEROKEE CIR

City

WAYCROSS

State

GA

Zip Code

31501-5242

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 11 2025

Transaction ID : A2BF7AC3B73434CED84B

Amount of Each Receipt this Period

3100.00

☒ Memo Item**B.**

Full Name (Last, First, Middle Initial)

HALL RENDER KILLIAN HEALTH LYMAN EMP PAC

Mailing Address 500 N MERIDIAN ST
STE 400

City

INDIANAPOLIS

State

IN

Zip Code

46204

FEC ID number of contributing
federal political committee.

C C00552083

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A0431DB77C26042A59AC

Amount of Each Receipt this Period

5000.00

☒ Memo Item**C.**

Full Name (Last, First, Middle Initial)

ALLIANCE FOR PHYSICAL THERAPY QUALITY AND INNOVATION PAC

Mailing Address 3745 SHAWNEE RD
STE 103

City

LIMA

State

OH

Zip Code

45806-1660

FEC ID number of contributing
federal political committee.

C C00777326

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A1468001C2204457F829

Amount of Each Receipt this Period

5000.00

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SYFAN, JIM, , ,

A.

Mailing Address 4014 SUMMERHILL DR

City

GAINESVILLE

State

GA

Zip Code

30506-7118

FEC ID number of contributing
federal political committee.

C

Name of Employer
SYFAN LOGISTICSOccupation
CEO

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : AE05DE32EA9C743A992F

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

CLARK, S., WILLIAM, , III

B.

Mailing Address 502 ISABELLA ST

City

WAYCROSS

State

GA

Zip Code

31501-3638

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLARK EYE CLINIC, PCOccupation
EYE SURGEON

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

Transaction ID : A25DEA3F4F10644B29E9

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

JONES, PATRICK, , ,

C.

Mailing Address 6243 TALL PINES DR

City

BLACKSHEAR

State

GA

Zip Code

31516-9313

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE JONES COMPANYOccupation
OWNER

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

Transaction ID : A099957DAEE6842B49F0

Amount of Each Receipt this Period

3500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TEAM BUDDY**A.**Mailing Address 824 S. MILLEDGE AVE
SUITE 101City
ATHENSState
GAZip Code
30605-1332FEC ID number of contributing
federal political committee.**C** C00726802

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

118237.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A4554AC0ABDF4A2794B

Amount of Each Receipt this Period

81101.68

☐ Memo Item

TRANSFER OF NET JFC FUNDS

B.

Full Name (Last, First, Middle Initial)

FREY, BRIAN, , ,

Mailing Address 1103 SCRUGGS ST

City
WAYCROSSState
GAZip Code
31501FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 24 2025

Transaction ID : ADAD62CBD58DA42E48AB

Amount of Each Receipt this Period

1000.00

☒ Memo Item**C.**

Full Name (Last, First, Middle Initial)

KITCHEN, JR., HARRY, , ,

Mailing Address 5 KNIGHTSBRIDGE LN

City
HILTON HEAD ISLANDState
SCZip Code
29928-3366FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : ACBE2A1666CC44AC4878

Amount of Each Receipt this Period

3500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

81101.68

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

PROFESSIONAL COMPOUNDING CENTERS OF AMERICA PAC**A.**

Mailing Address 9901 S WILCREST DR.

City
HOUSTONState
TXZip Code
77099FEC ID number of contributing
federal political committee.**C** C00558452

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : A1EC0B6D606CA4087BED

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ROCHE DIAGNOSTICS CORPORATION PAC**B.**Mailing Address 150 CLOVE ROAD
FLR 8City
LITTLE FALLSState
NJZip Code
07424FEC ID number of contributing
federal political committee.**C** C00072769

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A3BA5CBE1C7414C919C7

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

KALLAY II, E WYNN, , ,**C.**

Mailing Address 811 CHEROKEE CIR

City
WAYCROSSState
GAZip Code
31501-5242FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 11 2025

Transaction ID : A31E05F61AC5E463DA36

Amount of Each Receipt this Period

3500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BONFINI, JEREMY, T, ,

A.

Mailing Address 4240 HIGHBORNE DR NE

City

MARIETTA

State

GA

Zip Code

30066-2424

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 12 / 2025D D / Y Y Y Y Y
12 / 2025Y Y Y Y Y
2025

Transaction ID : AF356E0490336479CA10

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

CHOUDHRI, SOHAIL, , ,

B.

Mailing Address 917 1ST AVE N
604

City

JACKSONVILLE BEACH

State

FL

Zip Code

32250-4407

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 13 / 2025D D / Y Y Y Y Y
13 / 2025Y Y Y Y Y
2025

Transaction ID : A0C56AB4E38AD428CAC9

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

MCDONALD, CHAD, , ,

C.

Mailing Address 2431 LEJUENE RD

City

WAYCROSS

State

GA

Zip Code

31501-7641

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 13 / 2025D D / Y Y Y Y Y
13 / 2025Y Y Y Y Y
2025

Transaction ID : AE31725AF481043CC869

Amount of Each Receipt this Period

3500.00



Memo Item

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

0.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SINGH, PRITPAL, , ,

A.

Mailing Address 251 CHASTAIN CIR

City

RICHMOND HILL

State

GA

Zip Code

31324-9382

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 19 2025

Transaction ID : A10D0A7C1EFC54692B45

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

CAPES, JEFFREY, O., ,

B.

Mailing Address 28 CARRIAGE DR

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-5472

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2025

Transaction ID : A0A010844B8534B73B1B

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

SMITH, MIRANDA, M., ,

C.

Mailing Address 60 DAN TRCE

City

BRUNSWICK

State

GA

Zip Code

31525-4871

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2025

Transaction ID : AAE40B5C549BC442DAB5

Amount of Each Receipt this Period

500.00



Memo Item

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

0.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BOWEN, DANA, LARSON, ,

Mailing Address PO BOX 20152

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-8152

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : AD7F999CFD1D84C8AA5F

Amount of Each Receipt this Period

1000.00



Memo Item

A.

Full Name (Last, First, Middle Initial)

HDA PAC

Mailing Address 1275 PENNSYLVANIA AVE NW
STE 600

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

C00247569

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025D D / Y Y Y Y Y
31 / 2025Y Y Y Y Y
2025

Transaction ID : A4AA17DEA5F5F40E5942

Amount of Each Receipt this Period

5000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

HALL RENDER KILLIAN HEALTH LYMAN EMP PAC

Mailing Address 500 N MERIDIAN ST
STE 400

City

INDIANAPOLIS

State

IN

Zip Code

46204

FEC ID number of contributing
federal political committee.

C

C00552083

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025D D / Y Y Y Y Y
31 / 2025Y Y Y Y Y
2025

Transaction ID : AEB60D87327124CA99B8

Amount of Each Receipt this Period

5000.00



Memo Item

C.

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

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS**A.** Full Name (Last, First, Middle Initial)
ALLIANCE FOR PHYSICAL THERAPY QUALITY AND INNOVATION PACMailing Address 3745 SHAWNEE RD
STE 103City
LIMAState
OHZip Code
45806-1660FEC ID number of contributing
federal political committee.**C** C00777326

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	D D	Y Y Y Y
03	31	2025

Transaction ID : AA26E9134189641C2970

Amount of Each Receipt this Period

5000.00

☒ Memo Item**B.** Full Name (Last, First, Middle Initial)
CHANCY, HUGH, M, ,

Mailing Address PO BOX 486

City
HAHIRAState
GAZip Code
31632-0486FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
PHARMACY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	D D	Y Y Y Y
02	14	2025

Transaction ID : AF71EE10BFFA648809A0

Amount of Each Receipt this Period

1000.00

☒ Memo Item**C.** Full Name (Last, First, Middle Initial)
SYFAN, JIM, , ,

Mailing Address 4014 SUMMERHILL DR

City
GAINESVILLEState
GAZip Code
30506-7118FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	D D	Y Y Y Y
02	04	2025

Transaction ID : A7D91192B3A6A49EEB24

Amount of Each Receipt this Period

3500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial) BURTON, JEFF, J, ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 12 / 2025	
Mailing Address 808 N IRENA AVE UNIT B			Transaction ID : A0CC6C20D797B4CFCA27	
City REDONDO BEACH	State CA	Zip Code 90277-2224	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item <input checked="" type="checkbox"/> Memo Item		
Name of Employer BURTON STRATEGY GROUP		Occupation CONSULTANT		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		
B. Full Name (Last, First, Middle Initial) WHITE, JOEL, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 12 / 2025	
Mailing Address 1707 VALLEY AVE STE 430			Transaction ID : AFD3E65865E404A5B9AE	
City MCLEAN	State VA	Zip Code 22101-4721	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Memo Item <input checked="" type="checkbox"/> Memo Item		
Name of Employer HGA		Occupation CONSULTANT		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 2000.00		
C. Full Name (Last, First, Middle Initial) WILHEIT, PHILIP, A., , JR			Date of Receipt M M / D D / Y Y Y Y Y 02 / 14 / 2025	
Mailing Address 4633 SHORELINE DR			Transaction ID : AA72E0EC741BE472194E	
City GAINESVILLE	State GA	Zip Code 30506-3032	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Memo Item <input checked="" type="checkbox"/> Memo Item		
Name of Employer WILHEIT PACKAGING LLC		Occupation PRESIDENT		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 2000.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			0.00	
TOTAL This Period (last page this line number only)..... ▶				

SCHEDULE A (FEC Form 3)
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<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

STEWART, SAM, G., ,

A.

Mailing Address PO BOX 1888

City

WAYCROSS

State

GA

Zip Code

31502-1888

FEC ID number of contributing
federal political committee.

C

Name of Employer

STEWART DISTRIBUTION

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2025

Transaction ID : A69DA691735A34F12AE4

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BOYLE, WILLIAM, C., , JR.

B.

Mailing Address 900 CHEROKEE CIR

City

WAYCROSS

State

GA

Zip Code

31501-5206

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2025

Transaction ID : AB552AB42247C4168B54

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

RIVERS, JAMES, S., , III

C.

Mailing Address PO BOX 858

City

WAYCROSS

State

GA

Zip Code

31502-0858

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2025

Transaction ID : A154EF3C1743D40A986D

Amount of Each Receipt this Period

500.00

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

POOLE, JOHN, W., ,

A.

Mailing Address 240 SUNSET AVE

City

RIDGEWOOD

State

NJ

Zip Code

07450-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2025D D / Y Y Y Y Y
17 / 2025Y Y Y Y Y
2025

Transaction ID : AD269131D90E24D80B6B

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

BROWN, LAURA, S., ,

B.

Mailing Address PO BOX 21697

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-0797

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : A6085D199BEAA4CCFBD0

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

HICKMAN, WILLIAM, R., ,

C.

Mailing Address PO BOX 727

City

STATESBORO

State

GA

Zip Code

30459-0727

FEC ID number of contributing
federal political committee.

C

Name of Employer

GEORGIA STATE SENATE

Occupation

STATE SENATOR (DISTRICT 4)

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025D D / Y Y Y Y Y
31 / 2025Y Y Y Y Y
2025

Transaction ID : A41C65FE09BC34453833

Amount of Each Receipt this Period

3000.00



Memo Item

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

0.00

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHNSON, VICTOR, , ,

A.

Mailing Address 2821 BELLEVUE AVE

City

AUGUSTA

State

GA

Zip Code

30909-3803

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIVING WELL PHARMACY

Occupation

PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A2100D8E0F6094640B53

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ROSENBLOOM, ALAN, , ,

B.

Mailing Address 5804 AUGUSTA LN

City

BETHESDA

State

MD

Zip Code

20816-2316

FEC ID number of contributing
federal political committee.

C

Name of Employer

SENIOR CARE PHARMACY COALITION

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 31 2025

Transaction ID : A761DA2AF4F394C8EA1D

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

TURNER, DAVID, L., ,

C.

Mailing Address 1306 TRUMAN ST

City

WAYCROSS

State

GA

Zip Code

31501-4140

FEC ID number of contributing
federal political committee.

C

Name of Employer

LEWIS & RAVLERSON INC.

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2025

Transaction ID : AA463BF250A83483D911

Amount of Each Receipt this Period

1000.00

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

INGLETT, JUSTIN, K., ,

Mailing Address PO BOX 16

City

WAYCROSS

State

GA

Zip Code

31502-0016

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEMORIAL SATILLA HEALTH

Occupation

CFO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	2	5

Transaction ID : A202D50DC2C314C7B82A

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

NEELY, KENNETH, D., ,

Mailing Address 6610 PINE RIDGE CIR

City

BLACKSHEAR

State

GA

Zip Code

31516-5357

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEMORIAL SATILLA HEALTH

Occupation

HOSPITAL ADMINISTRATOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	2	5

Transaction ID : A0F02A6692BF14F5A882

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

CLARK, S., WILLIAM, , III

Mailing Address 502 ISABELLA ST

City

WAYCROSS

State

GA

Zip Code

31501-3638

FEC ID number of contributing
federal political committee.

C

Name of Employer

CLARK EYE CLINIC, PC

Occupation

EYE SURGEON

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	2	5

Transaction ID : A8B4454A8C04D4CF9825

Amount of Each Receipt this Period

3500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 106 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MILLER, MARTIN, J., ,

A.

Mailing Address PO BOX 13804

City

SAVANNAH

State

GA

Zip Code

31416-0804

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALCOVE PROPERTIES LLC

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : AC533DEBF583B457A8A1

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

JONES, PATRICK, , ,

B.

Mailing Address 6243 TALL PINES DR

City

BLACKSHEAR

State

GA

Zip Code

31516-9313

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE JONES COMPANY

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

Transaction ID : A3BBE6479584646C8B8D

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ABBOTT, KENT, , ,

C.Mailing Address 508 N BLAKE AVE
APT 2712

City

HYDRO

State

OK

Zip Code

73048-8639

FEC ID number of contributing
federal political committee.

C

Name of Employer

PHARMCAREUSA

Occupation

PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AC22DA9B5482C4C66B42

Amount of Each Receipt this Period

1000.00

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 107 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

PEEPLES, FRANK, K., , JR.

A.

Mailing Address PO BOX 10502

City
SAVANNAHState
GAZip Code
31412-0702FEC ID number of contributing
federal political committee.

C

Name of Employer
PEEPLES INDUSTRIES INC.Occupation
MARITIME EXEC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : A27FED6D3892841219FC

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MORRIS, TODD, , ,

B.

Mailing Address 540 RIVIERA DR

City
TAMPAState
FLZip Code
33606-3808FEC ID number of contributing
federal political committee.

C

Name of Employer
INMARKETOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 27 2025

Transaction ID : A1FA8A44A60C7415DBDE

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BOTTNER, RANDY, , ,

C.

Mailing Address 4 ADAMS POINT CROSS

City
SAVANNAHState
GAZip Code
31411-2710FEC ID number of contributing
federal political committee.

C

Name of Employer
HCAOccupation
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 19 2025

Transaction ID : A580B77A54C6B4C50BE9

Amount of Each Receipt this Period

2500.00

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 108 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

STROTHER, GORDON, T., ,

A. Mailing Address 112 WESTCHESTER

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-2473

FEC ID number of contributing
federal political committee.

C

Name of Employer

JC STRUTHER CO

Occupation

EXECUTIVE

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025

Transaction ID : AF97410B4A200420FA9A

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

QUINN, KEN, , ,

B. Mailing Address 105 WESTCHESTER

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-2474

FEC ID number of contributing
federal political committee.

C

Name of Employer

INTERNATIONAL AUTO LOGISTICS

Occupation

CFO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 12 / 2025

Transaction ID : A0D5482F335A64323AF9

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

ADAMS, BERTA, G., ,

C. Mailing Address 9 FRANKLIN CREEK RD S

City

SAVANNAH

State

GA

Zip Code

31411-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A6250F30DDEF04361BA5

Amount of Each Receipt this Period

1000.00



Memo Item

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

0.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MATTINGLY, MACK, F., ,

A.

Mailing Address 145 RICE ML

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-5450

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025

Transaction ID : A2663F061F4F741A0A27

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

JACKSON, RICHARD, L., ,

B.

Mailing Address 2655 NORTHWINDS PKWY

City

ALPHARETTA

State

GA

Zip Code

30009-2280

FEC ID number of contributing
federal political committee.

C

Name of Employer

JACKSON HEALTHCARE

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AA1BDB3E278454A6AB4A

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

FRYHOFFER, SANDRA, A., ,

C.

Mailing Address 1005 BUCKINGHAM CIR NW

City

ATLANTA

State

GA

Zip Code

30327-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2025

Transaction ID : A4597E3C32DC94E7F86F

Amount of Each Receipt this Period

1000.00

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

PAGE 110 OF 141

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TUCKER, ANDREW, , ,

A.

Mailing Address 10 LITTLE COMFORT RD

City
SAVANNAHState
GAZip Code
31411-1435FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 25 2025

Transaction ID : A56232BE30F2545879BF

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

0.00

118237.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 111 OF 141

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. 6602 ABERCORN, LLC

Mailing Address PO BOX 15246

City
SAVANNAHState
GAZip Code
31416-1946Purpose of Disbursement
RENT

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	9	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

908.75

Transaction ID : B78643370B1854FCC978

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 6602 ABERCORN, LLC

Mailing Address PO BOX 15246

City
SAVANNAHState
GAZip Code
31416-1946Purpose of Disbursement
RENT

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

908.75

Transaction ID : B2502D1FABF58499593D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERIS BANK

Mailing Address PO BOX 790408

City
SAINT LOUISState
MOZip Code
63179-0408Purpose of Disbursement
SEE MEMOS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2984.24

Transaction ID : B9D60EF7ADFB742A8B95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4801.74

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SKIPPERS FISH CAMP

Mailing Address 85 SCREVEN ST.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2025

City
DARIENState
GAZip Code
31305-9851

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

308.65

Transaction ID : B6F3305A715BF44259FA

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. PERRY LANE HOTEL

Mailing Address 256 E PERRY ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2025

City
SAVANNAHState
GAZip Code
31401-4012

FEC Identification Number

CPurpose of Disbursement
EVENT RENTAL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1204.82

Transaction ID : B21F07D7D01A244E48C5

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. JOE'S SEAFOOD

Mailing Address 750 15TH ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2025

City
WASHINGTONState
DCZip Code
20005-1018

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

240.26

Transaction ID : B8668272BC86F45FCBD9

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CONSTANT CONTACT

Mailing Address 1601 TRAPELO ROAD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	5

City
WALTHAMState
MAZip Code
02451-7333

FEC Identification Number

CPurpose of Disbursement
SOFTWARE EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

866.00

Transaction ID : BEF51616CF91542A2820

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. CAVA

Mailing Address 3644 KING ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	5

City
ALEXANDRIAState
VAZip Code
22302-1908

FEC Identification Number

CPurpose of Disbursement
CATERING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

352.98

Transaction ID : BDD1F867FF5664BD0893

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. AMERIS BANK

Mailing Address PO BOX 790408

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	5

City
SAINT LOUISState
MOZip Code
63179-0408

FEC Identification Number

CPurpose of Disbursement
SEE MEMOS

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4941.80

Transaction ID : BB6B7951F711A4E9AA23

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

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

4941.80

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 114 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE PRETZEL BAKERY

Mailing Address 257 15TH ST SE

City
WASHINGTONState
DCZip Code
20003-6608Purpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

504.00

Transaction ID : B2C8F523F0C3348CAB4D

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CONGRESSIONAL INSTITUTE, INC.

Mailing Address 1700 DIAGONAL ROAD

City
ALEXANDRIAState
VAZip Code
22314-2866Purpose of Disbursement
EVENT TICKETS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1879.41

Transaction ID : B77F8AE56A9284488B4A

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA AIRLINES

Mailing Address PO BOX 20706

City
ATLANTAState
GAZip Code
30320-6001Purpose of Disbursement
AIRFARE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

538.48

Transaction ID : B76B18CC3052B4C08934

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CONSTANT CONTACT

Mailing Address 1601 TRAPELO ROAD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	5

City
WALTHAMState
MAZip Code
02451-7333

FEC Identification Number

CPurpose of Disbursement
SOFTWARE EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

866.00

Transaction ID : B335A606AC04F4A52988

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINESMailing Address 4333 AMON CARTER BLVD
MD 5675

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	5

City
FORT WORTHState
TXZip Code
76155-2605

FEC Identification Number

CPurpose of Disbursement
TRAVEL EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

630.96

Transaction ID : B577D2AC AFC3E430CB03

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINESMailing Address 4333 AMON CARTER BLVD
MD 5675

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	5

City
FORT WORTHState
TXZip Code
76155-2605

FEC Identification Number

CPurpose of Disbursement
TRAVEL EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

425.03

Transaction ID : BF0A470977C48455B9B0

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERIS BANK

Mailing Address PO BOX 790408

City
SAINT LOUISState
MOZip Code
63179-0408Purpose of Disbursement
SEE MEMOS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

12193.98

Transaction ID : BA52788193B844D4598A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MONTAGE DEER VALLEY

Mailing Address 9100 MARSAC AVE

City
PARK CITYState
UTZip Code
84060-5201Purpose of Disbursement
TRAVEL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3682.92

Transaction ID : B6D313498769348B19FD

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. GOLDENER HIRSCH

Mailing Address 7520 ROYAL ST E

City
PARK CITYState
UTZip Code
84060-5111Purpose of Disbursement
TRAVEL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3708.51

Transaction ID : B2630D3F42355492897F

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

12193.98

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address P.O. BOX 6120

City
RAPID CITYState
SDZip Code
57709-6120Purpose of Disbursement
TRAVEL EXPENSE

002

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

879.30

Transaction ID : BD295A28838454DDD96E

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. NATIONAL CAR RENTAL

Mailing Address 10124 NATURAL BRIDGE RD

City
SAINT LOUISState
MOZip Code
63134-3301Purpose of Disbursement
TRAVEL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

497.54

Transaction ID : B4251950E7DE04AD9AB0

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPTAIN JOE'S SEAFOOD

Mailing Address 2115 GOLDEN ISLES HIGHWAY E

City
BAXLEYState
GAZip Code
31513Purpose of Disbursement
TRAVEL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1046.24

Transaction ID : B6EE812B9471344BE959

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CONSTANT CONTACT

Mailing Address 1601 TRAPELO ROAD

Date of Disbursement

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

City
WALTHAMState
MAZip Code
02451-7333

FEC Identification Number

CPurpose of Disbursement
SOFTWARE EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

866.00

Transaction ID : B3326D1BEAE7A40449F5

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINESMailing Address 4333 AMON CARTER BLVD
MD 5675

Date of Disbursement

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

City
FORT WORTHState
TXZip Code
76155-2605

FEC Identification Number

CPurpose of Disbursement
TRAVEL EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1377.57

Transaction ID : BF4B18C204D2B47899AD

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94103-1331

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

38.90

Transaction ID : B4D3E724C7F7B4E15A90

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANE STRATEGIESMailing Address 2100 PGA BLVD
APT 314City
NORTH PALM BEACHState
FLZip Code
33408-2782Purpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : B50E3A9ABA4094BA494F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANE STRATEGIESMailing Address 2100 PGA BLVD
APT 314City
NORTH PALM BEACHState
FLZip Code
33408-2782Purpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : B859BA580BBA64B8A979

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.90

Transaction ID : BA5CE30987BA6404295A

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6009.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

29.60

Transaction ID : BFF5F838602524BA6AD8

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

108.00

Transaction ID : BD63E331E4AF14FD1835

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : B2C7DA919E2E44763A10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

157.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

266.00

Transaction ID : B9C88088E6D044523B3C

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

135.50

Transaction ID : BAFF110983B2C48F8A3C

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

121.90

Transaction ID : BBB4FFFC08A2944FDAA1

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

523.40

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : BEE5932F40304445492A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

429.50

Transaction ID : B2BD47008FAAC46EC917

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

270.10

Transaction ID : B9923D64B2F294E2FA3C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

739.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.30

Transaction ID : BB2EF86206EB44F52A26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

161.30

Transaction ID : B449443AEEF944FDD809

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

608.60

Transaction ID : B25D056A711D04E0E9CA

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

771.20

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL

Mailing Address 205 PENNSYLVANIA AVE., SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : B9A0AC7321358422C9B9

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address P.O. BOX 537104

City
ATLANTAState
GAZip Code
30353-7104Purpose of Disbursement
TELEPHONE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

127.71

Transaction ID : BD1969EF5B8A84334BDC

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address P.O. BOX 537104

City
ATLANTAState
GAZip Code
30353-7104Purpose of Disbursement
TELEPHONE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

127.84

Transaction ID : B0153FB2D986E4FEC96B

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2505.55

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address P.O. BOX 537104

City
ATLANTAState
GAZip Code
30353-7104Purpose of Disbursement
TELEPHONE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

127.84

Transaction ID : B272F3E9F35614A0383E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 1ST STREET SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
CATERING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

114.65

Transaction ID : B7FE8B8C879564F3AB06

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 1ST STREET SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
CATERING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1286.27

Transaction ID : B46DEF973B4054BFC98F

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1528.76

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 1ST STREET SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
CATERING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

582.00

Transaction ID : B5A17F8B65DD3482DB21

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 1ST STREET SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
CATERING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

206.55

Transaction ID : BD05E650D1FFC49E58A6

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 1ST STREET SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
CATERING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

475.40

Transaction ID : B335CEFD52B2148ADBE1

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1263.95

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 127 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CARTER, AMY, , ,

Mailing Address 406 PURPLE FINCH DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	2	5

City
POOLERState
GAZip Code
31322-1712

FEC Identification Number

CPurpose of Disbursement
SEE MEMO

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

305.19

Transaction ID : BA8788E6A806E467F8C8

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. DELTA AIRLINES

Mailing Address PO BOX 20706

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	2	5

City
ATLANTAState
GAZip Code
30320-6001

FEC Identification Number

CPurpose of Disbursement
AIRFARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

305.19

Transaction ID : B61B10225F9B14750845

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. CARTER, AMY, , ,

Mailing Address 406 PURPLE FINCH DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	5

City
POOLERState
GAZip Code
31322-1712

FEC Identification Number

CPurpose of Disbursement
SEE MEMOS

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

690.78

Transaction ID : B16317379E17A4562AEE

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

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

995.97

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINES

Mailing Address PO BOX 20706

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	5

City
ATLANTAState
GAZip Code
30320-6001

FEC Identification Number

CPurpose of Disbursement
AIRFARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

284.98

Transaction ID : B45159224605443D38A3

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. CARTER, AMY, , ,

Mailing Address 406 PURPLE FINCH DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	5

City
POOLERState
GAZip Code
31322-1712

FEC Identification Number

CPurpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

275.80

Transaction ID : B327D15C84D40409BA29

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. CARTER, AMY, , ,

Mailing Address 406 PURPLE FINCH DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	2	5

City
POOLERState
GAZip Code
31322-1712

FEC Identification Number

CPurpose of Disbursement
SEE MEMOS

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2933.62

Transaction ID : B098B75B1C24C4CF08AB

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

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

2933.62

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 129 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GOLDEN ISLES REPUBLICAN WOMEN'S CLUB

Mailing Address 3030 E THIRD ST

Date of Disbursement

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

City
BRUNSWICKState
GAZip Code
31520-3731

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

Amount of Each Disbursement this Period

23.00

Transaction ID : B759AE052B0FD449BA13

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. THE CONGRESSIONAL CLUB

Mailing Address 2001 NEW HAMPSHIRE AVE, NW

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20009-3414

FEC Identification Number

CPurpose of Disbursement
MEMBERSHIP DUES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

Amount of Each Disbursement this Period

2910.62

Transaction ID : B76A6B7A01B244380848

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. CARTER, EARL LEROY, , ,

Mailing Address 194 HAMPTON POINT DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2025

City
SAINT SIMONS ISLANDState
GAZip Code
31522-5426

FEC Identification Number

CPurpose of Disbursement
SEE MEMOS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

Amount of Each Disbursement this Period

253.89

Transaction ID : B9F2E10E1F37244F78BC

☐ Memo Item

State:

District:

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

253.89

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 130 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94103-1331

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

002

Amount of Each Disbursement this Period

198.22

Transaction ID : B13E7BD50DDF84973944

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. EMPIRE CANYON GRILLMailing Address 9200 MARSAC AVE
309

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

City
PARK CITYState
UTZip Code
84060

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

002

Amount of Each Disbursement this Period

36.32

Transaction ID : BCBD9E39F5C804A61AC4

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. FRESHENS - IAH INTERNATIONAL

Mailing Address 2800 N TERMINAL RD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

City
HOUSTONState
TXZip Code
77032-5569

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

002

Amount of Each Disbursement this Period

19.35

Transaction ID : B79BB87ED3D3D45DDA10

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 131 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CARTER, EARL LEROY, , ,

Mailing Address 194 HAMPTON POINT DR

City
SAINT SIMONS ISLANDState
GAZip Code
31522-5426Purpose of Disbursement
SEE MEMOS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

217.77

Transaction ID : B97D79A4C311D4CD38E6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103-1331Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

217.77

Transaction ID : B9E4C106498E34D2AB65

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. COASTAL SIGNS + GRAPHIX

Mailing Address 500 PINE BARREN RD

City
POOLERState
GAZip Code
31322-9341Purpose of Disbursement
SIGNS/POSTAGE

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B379ADD9FC2AD4FAE8B3

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

467.77

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CRAWFORD, CHRIS, , ,Mailing Address 200 N ST NW
401City
WASHINGTONState
DCZip Code
20001-1220Purpose of Disbursement
SEE MEMO

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

229.30

Transaction ID : B6D0C62F5B15E48FF920

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address P.O. BOX 6120

City
RAPID CITYState
SDZip Code
57709-6120Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

229.30

Transaction ID : B6F455AC622D84B51B0B

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FUNDRAISING, INC.Mailing Address 800 W 47TH ST
STE 200City
KANSAS CITYState
MOZip Code
64112-1244Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6335.80

Transaction ID : B63FBD661388B43B5922

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6565.10

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FUNDRAISING, INC.Mailing Address 800 W 47TH ST
STE 200City
KANSAS CITYState
MOZip Code
64112-1244Purpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10445.00

Transaction ID : B5640485FECC04690AC7

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FUNDRAISING, INC.Mailing Address 800 W 47TH ST
STE 200City
KANSAS CITYState
MOZip Code
64112-1244Purpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

50.54

Transaction ID : B2C0BA68BC12845398A2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FUNDRAISING, INC.Mailing Address 800 W 47TH ST
STE 200City
KANSAS CITYState
MOZip Code
64112-1244Purpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : BA2EC1264C29546D18C7

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10745.54

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 134 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. IMPRESSION STRATEGY

Mailing Address 8506 BETHANY CT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

City
VIENNAState
VAZip Code
22182-5059

FEC Identification Number

CPurpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3191.11

Transaction ID : B9FA680CF8B054F8A86E

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. IMPRESSION STRATEGY

Mailing Address 8506 BETHANY CT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

City
VIENNAState
VAZip Code
22182-5059

FEC Identification Number

CPurpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3215.48

Transaction ID : BD5B2E60DEB64442E8DA

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. MONROE MARKETING

Mailing Address P.O. BOX 14558

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

City
SAVANNAHState
GAZip Code
31416-1558

FEC Identification Number

CPurpose of Disbursement
ADVERTISING

004

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1276.50

Transaction ID : BC843C848BB564B2AA4E

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

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

State:

District:

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

7683.09

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 135 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. O'DONNELL AND ASSOCIATES, LTD.

Mailing Address 829 EMERALD DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

City
ALEXANDRIAState
VAZip Code
22308-2623

FEC Identification Number

CPurpose of Disbursement
STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : BBBDED836FA734A338E1

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. O'DONNELL AND ASSOCIATES, LTD.

Mailing Address 829 EMERALD DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

City
ALEXANDRIAState
VAZip Code
22308-2623

FEC Identification Number

CPurpose of Disbursement
STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : B19DA1BB663494008BE3

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. PITNEY BOWES PRESORT SERVICESMailing Address 270 REMINGTON BLVD
STE B

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	5

City
BOLINGBROOKState
ILZip Code
60440

FEC Identification Number

CPurpose of Disbursement
DIRECT MAIL PRODUCTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2733.43

Transaction ID : BABC3E5502C4C42ED8E5

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

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

7733.43

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 136 OF 141

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICESMailing Address 824 S. MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30605-1332Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2059.35

Transaction ID : BC72D6753701948258E3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICESMailing Address 824 S. MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30605-1332Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2242.94

Transaction ID : B913BA8923F764BDEBB1

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REPUBLICAN LEADERSHIP FOR GEORGIA

Mailing Address PO BOX 550755

City
ATLANTAState
GAZip Code
30355-3255Purpose of Disbursement
EVENT SPONSORSHIP

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B00AFD2D6520743E7BBF

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5302.29

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SOUTH END STRATEGIES

Mailing Address 1300 N ST. NW #401

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2025

City
WASHINGTONState
DCZip Code
20005-3690

FEC Identification Number

CPurpose of Disbursement
STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : B8912D755D8A043A89D7

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. SOUTH END STRATEGIES

Mailing Address 1300 N ST. NW #401

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20005-3690

FEC Identification Number

CPurpose of Disbursement
STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : BB7CC41FB79D044EBA4E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. STAR OF COASTAL GEORGIAMailing Address 1505 RICHMOND ST
FL 2

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2025

City
BRUNSWICKState
GAZip Code
31520-6810

FEC Identification Number

CPurpose of Disbursement
EVENT SPONSORSHIP

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B47969B75917342B8A13

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

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

5500.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE KENNICKELL GROUP

Mailing Address 1700 E PRESIDENT ST

City
SAVANNAHState
GAZip Code
31404-1018Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

694.57

Transaction ID : B4D4D90890F77447F8CE

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE LUKENS COMPANY

Mailing Address 2800 SHIRLINGTON RD.,

City
ARLINGTONState
VAZip Code
22206-3601Purpose of Disbursement
DIRECT MAIL PRODUCTION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	5	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5605.79

Transaction ID : B788634D9B9484A7DB33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

44.16

Transaction ID : BF7638E41F627459DB91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6344.52

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.32

Transaction ID : B29FAAFB474624E17A35

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7.88

Transaction ID : B5E556B9E039E4316853

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

34.54

Transaction ID : B9C61AEC75BC1429D8F8

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

61.74

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.17

Transaction ID : B96B337B94FB743E4A5F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.90

Transaction ID : B49FF228D95984D3DBF2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

67.83

Transaction ID : B47A166BD39444945B4A

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

80.90

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

90105.94

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SMITH, BYRON, L., ,

Mailing Address 61 TRAVELERS WAY

City
RICHMOND HILLState
GAZip Code
31324-7725Purpose of Disbursement
REFUND

010

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1700.00

Transaction ID : BF9C77902CDDA4430B6E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1700.00

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

1700.00