

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

CALDWELL FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 02 / 11 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	6414.00	50474.78
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6414.00	50474.78
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	33791.21	60605.22
(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))	33791.21	60605.22
8. Cash on Hand at Close of Reporting Period (from Line 27)	4377.89	
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)	14508.33	

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

CALDWELL FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4005.00	29275.69
(ii) Unitemized.....	2409.00	12199.09
(iii) TOTAL of contributions from individuals ▶	6414.00	41474.78
(b) Political Party Committees.....	0.00	3000.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6414.00	50474.78
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	7772.37	22383.99
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	7772.37	22383.99
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	14186.37	72858.77

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.....	33791.21	60605.22
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	5000.00	7875.66
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	5000.00	7875.66
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	38791.21	68480.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	28982.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14186.37
25. SUBTOTAL (add Line 23 and Line 24).....	43169.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	38791.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4377.89

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

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

FOR LINE NUMBER: PAGE 5 OF 29
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
CALDWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Caldwell, Kyle, , ,
Mailing Address 364 Messersmith Rd
City Lake Lure State NC Zip Code 28746
FEC ID number of contributing federal political committee. C
Name of Employer Istari digital Occupation Software Engineer
Receipt For: 2026
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 11 / 2026
Transaction ID : SA11AI.4779
Amount of Each Receipt this Period
500.00
 Memo Item
V

B. Full Name (Last, First, Middle Initial)
Denaburg, Amanda, , ,
Mailing Address 4909 Great Oak Circle
City Birmingham State AL Zip Code 35223
FEC ID number of contributing federal political committee. C
Name of Employer Wallace, Jordan & Ratliff LLC Occupation Paralegal
Receipt For: 2026
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 05 / 2026
Transaction ID : SA11AI.4762
Amount of Each Receipt this Period
150.00
 Memo Item
Campaign Contribution

C. Full Name (Last, First, Middle Initial)
Dougher, Maureen, A, ,
Mailing Address 2197 Zion Rd
City Morganton State NC Zip Code 28655
FEC ID number of contributing federal political committee. C
Name of Employer Requested Occupation Requested
Receipt For: 2026
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 16 / 2026
Transaction ID : SA11AI.4872
Amount of Each Receipt this Period
300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00
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 6 OF 29
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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)
CALDWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kern, Leslie, , ,

Mailing Address 507 Lenoir St

City Morganton State NC Zip Code 28655

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 10 / 2026

Transaction ID : SA11AI.4874

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Kern, Leslie, , ,

Mailing Address 507 Lenoir St

City Morganton State NC Zip Code 28655

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 05 / 2026

Transaction ID : SA11AI.4823

Amount of Each Receipt this Period

Memo Item
Campaign Contribution

C. Full Name (Last, First, Middle Initial)
Kobland, Fay, , ,

Mailing Address 1813 Grey Rock Pkwy

City Lake Lure State NC Zip Code 28746

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2026

Transaction ID : SA11AI.4788

Amount of Each Receipt this Period

Memo Item
Campaign Contribution

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

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 7 OF 29	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)
CALDWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kobland, Fay, , ,

Mailing Address 1813 Grey Rock Pkwy

City Lake Lure	State NC	Zip Code 28746
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4800

Amount of Each Receipt this Period

Memo Item
Campaign Contribution

B. Full Name (Last, First, Middle Initial)
Kobland, Fay, , ,

Mailing Address 1813 Grey Rock Pkwy

City Lake Lure	State NC	Zip Code 28746
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4806

Amount of Each Receipt this Period

Memo Item
Campaign Contribution

C. Full Name (Last, First, Middle Initial)
Mccurdy, Maxwell, , ,

Mailing Address 5414 Starflower Drive

City Charlotte	State NC	Zip Code 28215
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not employed	Occupation Not employed
----------------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4755

Amount of Each Receipt this Period

Memo Item
Campaign Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="330.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="330.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 29
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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)
CALDWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Meyn, William, , ,

Mailing Address 1035 Mangrove Lane

City Alameda State CA Zip Code 94502

FEC ID number of contributing federal political committee.

Name of Employer Government Occupation Planner

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 10 / 2026

Transaction ID : SA11AI.4830

Amount of Each Receipt this Period

Memo Item
Campaign Contribution

B. Full Name (Last, First, Middle Initial)
Phifer, Edward, , ,

Mailing Address 213 Ridgeside Terrace

City Morganton State NC Zip Code 28655

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 16 / 2026

Transaction ID : SA11AI.4873

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
Saylor, Linda, , ,

Mailing Address 16295 Aspen Lane

City Biloxi State MS Zip Code 39532

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2026

Transaction ID : SA11AI.4829

Amount of Each Receipt this Period

Memo Item
Campaign Contribution

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

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 9 OF 29	
<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	

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)
CALDWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stanback, Brad, , ,

Mailing Address 810 Long Branch Rd

City Canton	State NC	Zip Code 28716
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer self	Occupation not employed
--------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4774

Amount of Each Receipt this Period

Memo Item
Campaign Contribution

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

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.

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="4005.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 29
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
CALDWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CALDWELL, BRENT, , ,

Mailing Address 13301 PINE HARBOR

City CHARLOTTE State NC Zip Code 28278

FEC ID number of contributing federal political committee. **C** H6NC14036

Name of Employer Occupation
Law Office of Brent Caldwell Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
14646.87

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 04 / 2026

Transaction ID : SA13A.4879

Amount of Each Receipt this Period
35.25

Memo Item
Credit Card Used for Campaign

B. Full Name (Last, First, Middle Initial)
CALDWELL, BRENT, , ,

Mailing Address 13301 PINE HARBOR

City CHARLOTTE State NC Zip Code 28278

FEC ID number of contributing federal political committee. **C** H6NC14036

Name of Employer Occupation
Law Office of Brent Caldwell Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
16131.09

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2026

Transaction ID : SA13A.4910

Amount of Each Receipt this Period
1484.22

Memo Item
Charges to campaign credit card

C. Full Name (Last, First, Middle Initial)
CALDWELL, BRENT, , ,

Mailing Address 13301 PINE HARBOR

City CHARLOTTE State NC Zip Code 28278

FEC ID number of contributing federal political committee. **C** H6NC14036

Name of Employer Occupation
Law Office of Brent Caldwell Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
22383.99

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 11 / 2026

Transaction ID : SA13A.4888

Amount of Each Receipt this Period
6252.90

Memo Item
Campaign Credit Card

SUBTOTAL of Receipts This Page (optional).....▶	7772.37
TOTAL This Period (last page this line number only).....▶	7772.37

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. Accurate Append, Inc

Mailing Address 1100 Bellevue Way NE Suite 8a.

City Bellevue State WA Zip Code 98004

Purpose of Disbursement Data Append Category/Type 003

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 01 / 25 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 125.00

Transaction ID : SB17.4903

Memo Item

Full Name (Last, First, Middle Initial)
B. ActBlue

Mailing Address

City Somerville State MA Zip Code 02144

Purpose of Disbursement Credit Card Processing Fee Category/Type 003

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 02 / 11 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 176.45

Transaction ID : SB17.4857

Memo Item

Full Name (Last, First, Middle Initial)
C. Adobe, Inc.

Mailing Address 345 Park Avenue

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement Software Category/Type 004

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 01 / 10 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 26.80

Transaction ID : SB17.4891

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 328.25

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chase National Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2026
Mailing Address 270 Park Avenue		FEC Identification Number C C00914549
City New York	State NY	Zip Code 10017
Purpose of Disbursement Purchase interest charge	Category/ Type 001	
Candidate Name CALDWELL FOR CONGRESS	Amount of Each Disbursement this Period 143.73	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4725
State: NC District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Chase National Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2026
Mailing Address 270 Park Avenue		FEC Identification Number C C00914549
City New York	State NY	Zip Code 10017
Purpose of Disbursement Credit Card Payment	Category/ Type 001	
Candidate Name CALDWELL FOR CONGRESS	Amount of Each Disbursement this Period 5000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4843
State: NC District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Chase National Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2026
Mailing Address 270 Park Avenue		FEC Identification Number C C00914549
City New York	State NY	Zip Code 10017
Purpose of Disbursement Credit Card Payment	Category/ Type 001	
Candidate Name CALDWELL FOR CONGRESS	Amount of Each Disbursement this Period 661.26	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4838
State: NC District: 14	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5804.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chase National Bank		Date of Disbursement MM / DD / YYYY 02 / 04 / 2026
Mailing Address 270 Park Avenue		FEC Identification Number C C00914549
City New York	State NY	Zip Code 10017
Purpose of Disbursement Purchase Interest Charge	Category/ Type 001	
Candidate Name CALDWELL FOR CONGRESS	Amount of Each Disbursement this Period 89.84	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4911
State: NC District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Chase National Bank		Date of Disbursement MM / DD / YYYY 02 / 10 / 2026
Mailing Address 270 Park Avenue		FEC Identification Number C C00914549
City New York	State NY	Zip Code 10017
Purpose of Disbursement Credit Card Payment	Category/ Type 001	
Candidate Name CALDWELL FOR CONGRESS	Amount of Each Disbursement this Period 5000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4834
State: NC District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Consolidated Press		Date of Disbursement MM / DD / YYYY 02 / 10 / 2026
Mailing Address 3900 Greensboro St		FEC Identification Number C
City Charlotte	State NC	Zip Code 28206
Purpose of Disbursement Yard Signs	Category/ Type 004	
Candidate Name	Amount of Each Disbursement this Period 6108.58	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4881
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	11198.42
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kellum, Shelbie, , ,		Date of Disbursement MM / DD / YYYY 01 / 07 / 2026
Mailing Address 2011 Cherry St		FEC Identification Number C C00914549
City Vicksburg	State MS	Zip Code 39180
Purpose of Disbursement Campaign Aide	Category/ Type 001	
Candidate Name CALDWELL FOR CONGRESS	Amount of Each Disbursement this Period 142.35	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4889
State: NC District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Kellum, Shelbie, , ,		Date of Disbursement MM / DD / YYYY 01 / 12 / 2026
Mailing Address 2011 Cherry St		FEC Identification Number C C00914549
City Vicksburg	State MS	Zip Code 39180
Purpose of Disbursement Compensation	Category/ Type 001	
Candidate Name CALDWELL FOR CONGRESS	Amount of Each Disbursement this Period 1454.06	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4840
State: NC District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Kellum, Shelbie, , ,		Date of Disbursement MM / DD / YYYY 01 / 12 / 2026
Mailing Address 2011 Cherry St		FEC Identification Number C C00914549
City Vicksburg	State MS	Zip Code 39180
Purpose of Disbursement Campaign Aide	Category/ Type 001	
Candidate Name CALDWELL FOR CONGRESS	Amount of Each Disbursement this Period 181.35	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4892
State: NC District: 14	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1777.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. Kellum, Shelbie, , ,

Mailing Address 2011 Cherry St

City Vicksburg State MS Zip Code 39180

Purpose of Disbursement Campaign Aide Category/Type 001

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 01 / 19 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 99.54

Transaction ID : SB17.4895

Memo Item

Full Name (Last, First, Middle Initial)
B. Kellum, Shelbie, , ,

Mailing Address 2011 Cherry St

City Vicksburg State MS Zip Code 39180

Purpose of Disbursement Campaign Aide Category/Type 001

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 02 / 02 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 213.17

Transaction ID : SB17.4907

Memo Item

Full Name (Last, First, Middle Initial)
C. Numero Ai

Mailing Address 695 Town Center Drive, Suite 1100

City Costa Mesa State CA Zip Code 92626

Purpose of Disbursement AI Data Analytics and Hosting Category/Type 003

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 01 / 04 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 18.87

Transaction ID : SB17.4724

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 331.58

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Numero Ai		M M / D D / Y Y Y Y 01 / 04 / 2026
Mailing Address 695 Town Center Drive, Suite 1100		FEC Identification Number
City Costa Mesa	State CA	Zip Code 92626
Purpose of Disbursement Fundraising Software	003	
Candidate Name CALDWELL FOR CONGRESS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 18.87
State: NC District: 14	Transaction ID : SB17.4878	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Numero Ai		M M / D D / Y Y Y Y 01 / 05 / 2026
Mailing Address 695 Town Center Drive, Suite 1100		FEC Identification Number
City Costa Mesa	State CA	Zip Code 92626
Purpose of Disbursement Numero Payment	004	
Candidate Name CALDWELL FOR CONGRESS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1650.00
State: NC District: 14	Transaction ID : SB17.4845	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Numero Ai		M M / D D / Y Y Y Y 01 / 05 / 2026
Mailing Address 695 Town Center Drive, Suite 1100		FEC Identification Number
City Costa Mesa	State CA	Zip Code 92626
Purpose of Disbursement Numero Texting	004	
Candidate Name CALDWELL FOR CONGRESS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1718.31
State: NC District: 14	Transaction ID : SB17.4846	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3387.18
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Numero Ai

Mailing Address 695 Town Center Drive, Suite 1100

City Costa Mesa State CA Zip Code 92626

Purpose of Disbursement Software Category/Type 001

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 02 / 04 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 18.87

Transaction ID : SB17.4909

Memo Item

Full Name (Last, First, Middle Initial)

B. Pingdex

Mailing Address Main Ave

City Scranton State PA Zip Code 18508

Purpose of Disbursement Phone Number appending Category/Type 003

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 01 / 05 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 505.99

Transaction ID : SB17.4849

Memo Item

Full Name (Last, First, Middle Initial)

C. Pingdex

Mailing Address Main Ave

City Scranton State PA Zip Code 18508

Purpose of Disbursement Append White Pages Category/Type 003

Candidate Name CALDWELL FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 14

Date of Disbursement 01 / 05 / 2026

FEC Identification Number C C00914549

Amount of Each Disbursement this Period 22.99

Transaction ID : SB17.4851

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 547.85

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

A. Sherwood, Gabriel, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 38950

City Charlotte State NC Zip Code 28278

Purpose of Disbursement Compensation Category/Type 001

Candidate Name CALDWELL FOR CONGRESS

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

State: NC District: 14

Date of Disbursement: 01 / 05 / 2026

FEC Identification Number: C C00914549

Amount of Each Disbursement this Period: 3750.00

Transaction ID : SB17.4852

Memo Item

B. Sherwood, Gabriel, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 38950

City Charlotte State NC Zip Code 28278

Purpose of Disbursement Compensation Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 01 / 15 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 2250.00

Transaction ID : SB17.4875

Memo Item

C. Sherwood, Gabriel, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 38950

City Charlotte State NC Zip Code 28278

Purpose of Disbursement Compensation Category/Type 001

Candidate Name CALDWELL FOR CONGRESS

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

State: NC District: 14

Date of Disbursement: 01 / 30 / 2026

FEC Identification Number: C C00914549

Amount of Each Disbursement this Period: 2250.00

Transaction ID : SB17.4839

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 8250.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sherwood, Gabriel, , ,			Date of Disbursement MM / DD / YYYY 02 / 09 / 2026	
Mailing Address PO Box 38950			FEC Identification Number C C00914549	
City Charlotte	State NC	Zip Code 28278	Amount of Each Disbursement this Period 243.10	
Purpose of Disbursement Reimbursement for Campbell Dinner Tickets		Category/ Type 001	Transaction ID : SB17.4835	
Candidate Name CALDWELL FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NC District: 14				

Full Name (Last, First, Middle Initial) B. Sherwood, Gabriel, , ,			Date of Disbursement MM / DD / YYYY 02 / 09 / 2026	
Mailing Address PO Box 38950			FEC Identification Number C C00914549	
City Charlotte	State NC	Zip Code 28278	Amount of Each Disbursement this Period 305.66	
Purpose of Disbursement Reimbursement for Palm Cards		Category/ Type 004	Transaction ID : SB17.4837	
Candidate Name CALDWELL FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NC District: 14				

Full Name (Last, First, Middle Initial) C. United States Postal Service			Date of Disbursement MM / DD / YYYY 01 / 05 / 2026	
Mailing Address 10926 Quality Drive			FEC Identification Number C C00914549	
City Charlotte	State NC	Zip Code 28278	Amount of Each Disbursement this Period 78.00	
Purpose of Disbursement Stamps		Category/ Type 004	Transaction ID : SB17.4844	
Candidate Name CALDWELL FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NC District: 14				

SUBTOTAL of Disbursements This Page (optional).....▶	626.76
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2026
Mailing Address 10926 Quality Drive		FEC Identification Number C C00914549
City Charlotte	State NC	Zip Code 28278
Purpose of Disbursement Stamps	Category/ Type 004	
Candidate Name CALDWELL FOR CONGRESS		Amount of Each Disbursement this Period 702.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC District: 14	Transaction ID : SB17.4847 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	702.00
TOTAL This Period (last page this line number only).....▶	32954.79

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CALDWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CALDWELL, BRENT, , ,		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2026
Mailing Address 13301 PINE HARBOR		FEC Identification Number C C00914549
City CHARLOTTE	State NC	Zip Code 28278
Purpose of Disbursement Campaign credit card payment		001
Candidate Name CALDWELL FOR CONGRESS		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 14	Amount of Each Disbursement this Period 5000.00
		Transaction ID : SB19A.4732
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
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:	Amount of Each Disbursement this Period
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
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:	Amount of Each Disbursement this Period
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **CALDWELL FOR CONGRESS** Transaction ID : **SC/10.4650**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
CALDWELL, BRENT, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 13301 PINE HARBOR			<input type="checkbox"/> General
City CHARLOTTE		State NC	<input type="checkbox"/> Other (specify) ▼
ZIP Code 28278		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25.00	0.00	25.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	08 / 12 / 2025	08/12/2035	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	25.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **CALDWELL FOR CONGRESS** Transaction ID : **SC/10.4683**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
CALDWELL, BRENT, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 13301 PINE HARBOR			<input type="checkbox"/> General
City CHARLOTTE		State NC	<input type="checkbox"/> Other (specify) ▼
ZIP Code 28278		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
96.95	40.00	56.95

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	MM / DD / YYYY 10 / 04 / 2025	MM / DD / YYYY	19.99 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	56.95
TOTALS This Period (last page in this line only).....▶	

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

**SCHEDULE C (FEC Form 3)
LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 24 OF 29
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full) **CALDWELL FOR CONGRESS** Transaction ID : **SC/10.4685**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
CALDWELL, BRENT, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 13301 PINE HARBOR			<input type="checkbox"/> General
City CHARLOTTE		State NC	ZIP Code 28278
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
			<input type="checkbox"/> Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5626.00	2835.66	2790.34

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 11 / 04 / 2025	M M / D D / Y Y Y Y	19.99 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	2790.34
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **CALDWELL FOR CONGRESS** Transaction ID : **SC/10.4730**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
CALDWELL, BRENT, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 13301 PINE HARBOR			<input type="checkbox"/> General
City CHARLOTTE		State NC	ZIP Code 28278
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
			<input type="checkbox"/> Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6607.81	5000.00	1607.81

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 04 / 2025	M M / D D / Y Y Y Y	19.99 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	1607.81
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4738**
CALDWELL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
CALDWELL, BRENT, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 13301 PINE HARBOR		<input type="checkbox"/> General
City CHARLOTTE		<input type="checkbox"/> Other (specify) ▼
State NC	ZIP Code 28278	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2255.86	0.00	2255.86

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 31 / 2025	M M / D D / Y Y Y Y	19.99 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	2255.86
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **CALDWELL FOR CONGRESS** Transaction ID : **SC/10.4879**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
CALDWELL, BRENT, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 13301 PINE HARBOR			<input type="checkbox"/> General
City CHARLOTTE		State NC	ZIP Code 28278
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
			<input type="checkbox"/> Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
35.25	0.00	35.25

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	01 / 04 / 2026	01/04/2036	19.99 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	35.25
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **CALDWELL FOR CONGRESS** Transaction ID : **SC/10.4910**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
CALDWELL, BRENT, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 13301 PINE HARBOR			<input type="checkbox"/> General
			<input type="checkbox"/> Other (specify) ▼
City CHARLOTTE	State NC	ZIP Code 28278	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1484.22	0.00	1484.22

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	MM / DD / YYYY 02 / 04 / 2026	MM / DD / YYYY 02/04/2036	19.99 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	1484.22
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **CALDWELL FOR CONGRESS** Transaction ID : **SC/10.4888**

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item CALDWELL, BRENT, , ,		Election: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 13301 PINE HARBOR		<input checked="" type="checkbox"/> Personal Funds of the Candidate
City CHARLOTTE	State NC	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6252.90	0.00	6252.90

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 02 / 11 / 2026	M M / D D / Y Y Y Y 02/11/2036	19.99 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	6252.90
TOTALS This Period (last page in this line only).....▶	14508.33

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