

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

Office Use Only

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

12FE4M5

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

ADDRESS (number and street)

4246 CHAIN BRIDGE RD

Check if different
than previously
reported. (ACC)

FAIRFAX

VA

22030

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00277335

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Rumberg, Michael, , ,

Signature of Treasurer

Rumberg, Michael, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>2</td><td>6</td><td></td></tr></table>	Y	Y	Y	Y	Y	2	0	2	6			<table><tr><td>4</td><td>0</td><td>4</td><td>8</td><td>1</td><td>.</td><td>1</td><td>3</td></tr></table>	4	0	4	8	1	.	1	3
Y	Y	Y	Y	Y																
2	0	2	6																	
4	0	4	8	1	.	1	3													
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td>4</td><td>0</td><td>4</td><td>8</td><td>1</td><td>.</td><td>1</td><td>3</td></tr></table>	4	0	4	8	1	.	1	3											
4	0	4	8	1	.	1	3													
(c) Total Receipts (from Line 19)	<table><tr><td>9</td><td>0</td><td>6</td><td>6</td><td>.</td><td>2</td><td>9</td></tr></table>	9	0	6	6	.	2	9	<table><tr><td>9</td><td>0</td><td>6</td><td>6</td><td>.</td><td>2</td><td>9</td></tr></table>	9	0	6	6	.	2	9				
9	0	6	6	.	2	9														
9	0	6	6	.	2	9														
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td>4</td><td>9</td><td>5</td><td>4</td><td>7</td><td>.</td><td>4</td><td>2</td></tr></table>	4	9	5	4	7	.	4	2	<table><tr><td>4</td><td>9</td><td>5</td><td>4</td><td>7</td><td>.</td><td>4</td><td>2</td></tr></table>	4	9	5	4	7	.	4	2		
4	9	5	4	7	.	4	2													
4	9	5	4	7	.	4	2													
7. Total Disbursements (from Line 31).....	<table><tr><td>5</td><td>7</td><td>2</td><td>9</td><td>.</td><td>7</td><td>2</td></tr></table>	5	7	2	9	.	7	2	<table><tr><td>5</td><td>7</td><td>2</td><td>9</td><td>.</td><td>7</td><td>2</td></tr></table>	5	7	2	9	.	7	2				
5	7	2	9	.	7	2														
5	7	2	9	.	7	2														
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td>4</td><td>3</td><td>8</td><td>1</td><td>7</td><td>.</td><td>7</td><td>0</td></tr></table>	4	3	8	1	7	.	7	0	<table><tr><td>4</td><td>3</td><td>8</td><td>1</td><td>7</td><td>.</td><td>7</td><td>0</td></tr></table>	4	3	8	1	7	.	7	0		
4	3	8	1	7	.	7	0													
4	3	8	1	7	.	7	0													
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td>0</td><td>0</td><td>0</td><td></td><td></td><td></td><td></td><td></td></tr></table>	0	0	0																
0	0	0																		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td>0</td><td>0</td><td>0</td><td></td><td></td><td></td><td></td><td></td></tr></table>	0	0	0																
0	0	0																		



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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

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
01 / 31 / 2026

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6770.62

6770.62

(ii) Unitemized

2295.67

2295.67

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

9066.29

9066.29

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

9066.29

9066.29

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

9066.29

9066.29

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

9066.29

9066.29

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5729.72	5729.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5729.72	5729.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5729.72	5729.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5729.72	5729.72

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9066.29	9066.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9066.29	9066.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	5729.72	5729.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	5729.72	5729.72

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 10
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

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

A. Foster, Beverly, , ,

Mailing Address 4321 Woodway St

City
AlexandriaState
VAZip Code
22312FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 09 / 2026

Transaction ID : SA11AI.60397

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

B. Madden, William, J., Mr.,

Mailing Address 1465

Hampton Ridge Dr.

City
McLeanState
VAZip Code
22101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 22 / 2026

Transaction ID : SA11AI.60398

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. Purves, Arthur, G., Mr.,

Mailing Address 9350

Campbell Road

City
ViennaState
VAZip Code
22182FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
General DynamicsOccupation (for Individual)
Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 25 / 2026

Transaction ID : SA11AI.60471

Amount of Each Receipt this Period

312.49

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

6312.49

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

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

FOR LINE NUMBER: PAGE 7 OF 10
(check only one)

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

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NAME OF COMMITTEE (In Full)

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

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

A. Robinson, Steven, , ,

Mailing Address 6049 Burnside Landing Dr

City
Burke

State
VA

Zip Code
22015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Regulus Group

Occupation (for Individual)

Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.13

Date of Receipt

MM / DD / YYYY
01 / 20 / 2026

Transaction ID : SA11AI.60417

Amount of Each Receipt this Period

208.13

☐ Memo Item

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

B. Spooner, Mark, , ,

Mailing Address 8209 Taunton PI

City
Springfield

State
VA

Zip Code
22152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
01 / 22 / 2026

Transaction ID : SA11AI.60399

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

☐ Memo Item

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

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

458.13

6770.62

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 10

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

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NAME OF COMMITTEE (In Full)

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Full Name (Last, First, Middle Initial)

A. Argenta

Mailing Address 5870 Wind Cave Ln

City
JacksonvilleState
VAZip Code
32258

Purpose of Disbursement

Software

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.60392**

Amount of Each Disbursement this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Arrow Technologies

Mailing Address 7655-F Fullerton Rd

City
SpringfieldState
VAZip Code
22153

Purpose of Disbursement

Printing

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	0			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.60405**

Amount of Each Disbursement this Period

209.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign NucleusMailing Address 1512 E Broward Blvd
#104BCity
Fort LauderdaleState
FLZip Code
33301

Purpose of Disbursement

Consulting

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.60404**

Amount of Each Disbursement this Period

800.00

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

2259.70

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

PAGE 9 OF 10

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

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NAME OF COMMITTEE (In Full)

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Full Name (Last, First, Middle Initial)

A. Dominion Virginia Power

Mailing Address P.O. Box 26543

City
RichmondState
VAZip Code
23290

Purpose of Disbursement

Utility

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.60406**

Amount of Each Disbursement this Period

369.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gillespie, Catherine, H, ,

Mailing Address 9382 Mt. Vernon Circle

City
AlexandriaState
VAZip Code
22309

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	1			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.60427**

Amount of Each Disbursement this Period

1040.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Patriot GrassrootsMailing Address 1021 E Lincoln Way
#503City
Cheyenne WayState
WYZip Code
82001

Purpose of Disbursement

Consulting

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.60391**

Amount of Each Disbursement this Period

913.00

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

2323.30

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

PAGE 10 OF 10

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

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NAME OF COMMITTEE (In Full)

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Full Name (Last, First, Middle Initial)

A. Yardi Systems

Mailing Address 8601 Georgia Ave

City
Silver SpringState
MDZip Code
20910

Purpose of Disbursement

Software

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	6			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.60402**

Amount of Each Disbursement this Period

426.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	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:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

426.75

5009.75