

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Hemp Industry & Farmers of America

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2026"/> | <input type="text" value="253382.64"/> | <input type="text" value="253382.64"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="95252.68"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="189961.07"/> | <input type="text" value="346987.33"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="285213.75"/> | <input type="text" value="600369.97"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="73803.57"/> | <input type="text" value="388959.79"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="211410.18"/> | <input type="text" value="211410.18"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

Write or Type Committee Name

Hemp Industry & Farmers of America

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

| 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)..... | 14400.23 | 35828.88 |
| (ii) Unitemized | 560.84 | 1158.45 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 14961.07 | 36987.33 |
| (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) | 14961.07 | 36987.33 |
| 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.)..... | 175000.00 | 310000.00 |
| 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)).....▶ | 189961.07 | 346987.33 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 189961.07 | 346987.33 |

DETAILED SUMMARY PAGE
of Disbursements

| 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 | 651.27 | 1861.23 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 651.27 | 1861.23 |
| 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)..... | 73152.30 | 387098.56 |
| 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)) .. | 73803.57 | 388959.79 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 73803.57 | 388959.79 |

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) | 14961.07 | 36987.33 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 14961.07 | 36987.33 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 651.27 | 1861.23 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 651.27 | 1861.23 |

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

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

FOR LINE NUMBER: PAGE 6 OF 24
(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)
Hemp Industry & Farmers of America

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Arnold, Juliana, , ,
 Mailing Address 33 Finch Dr
 City Lebanon State PA Zip Code 17042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBD N Stuff Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.73

Date of Receipt 02 / 16 / 2026
Transaction ID : SA11AI.5123
 Amount of Each Receipt this Period 260.73
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WinRed
 Mailing Address 4250 Fairfax Dr Ste 600
 City Arlington State VA Zip Code 22203
 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 ▼ 31435.97

Date of Receipt 02 / 16 / 2026
Transaction ID : SA11AI.5123.0
 Amount of Each Receipt this Period 260.73
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Crabtree, Jacob, , ,
 Mailing Address 4168 W 1st Ave
 City Eugene State OR Zip Code 97402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Solida Labs Inc. Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.73

Date of Receipt 02 / 16 / 2026
Transaction ID : SA11AI.5102
 Amount of Each Receipt this Period 260.73
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 521.46
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 24 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WinRed | | Date of Receipt |
| Mailing Address 4250 Fairfax Dr Ste 600 | | <input type="text" value="02"/> / <input type="text" value="16"/> / <input type="text" value="2026"/> |
| City Arlington | State VA | Zip Code 22203 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : SA11AI.5102.0 |
| Name of Employer (for Individual) | | Amount of Each Receipt this Period <input type="text" value="260.73"/> |
| Occupation (for Individual) | | <input checked="" type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="28382.00"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dean, William, , , | | Date of Receipt |
| Mailing Address 1200 North Sandhills Boulevard | | <input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2026"/> |
| City Aberdeen | State NC | Zip Code 28315 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : SA11AI.5197 |
| Name of Employer (for Individual) Flowland INC | | Amount of Each Receipt this Period <input type="text" value="104.48"/> |
| Occupation (for Individual) Retail Owner | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="208.96"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WinRed | | Date of Receipt |
| Mailing Address 4250 Fairfax Dr Ste 600 | | <input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2026"/> |
| City Arlington | State VA | Zip Code 22203 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : SA11AI.5197.0 |
| Name of Employer (for Individual) | | Amount of Each Receipt this Period <input type="text" value="104.48"/> |
| Occupation (for Individual) | | <input checked="" type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="36517.02"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="104.48"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 24 |
| | <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)
Hemp Industry & Farmers of America

A. Floyd, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12312 Marsh Field Drive
 City Raleigh State NC Zip Code 27614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Hempie Corporation LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5208.96

Date of Receipt 02 / 24 / 2026
Transaction ID : SA11AI.5195
 Amount of Each Receipt this Period 2604.48
 Memo Item

B. WinRed
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4250 Fairfax Dr Ste 600
 City Arlington State VA Zip Code 22203
 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 ▼ 36412.54

Date of Receipt 02 / 24 / 2026
Transaction ID : SA11AI.5195.0
 Amount of Each Receipt this Period 2604.48
 Memo Item

C. Gleason, Zach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7537 E McDonald Dr
 City Scottsdale State AZ Zip Code 85250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jolly Cannabis Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 521.15

Date of Receipt 02 / 02 / 2026
Transaction ID : SA11AI.4841
 Amount of Each Receipt this Period 521.15
 Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3125.63 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 9 OF 24 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

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

Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
27860.54

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 02 | | 2026 |

Transaction ID : SA11AI.4841.0

Amount of Each Receipt this Period

| |
|---------|
| 1041.98 |
|---------|

Memo Item

B. Gleason, Zach, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7537 E McDonald Dr

| | | |
|--------------------|-------------|-------------------|
| City Scottsdale | State AZ | Zip Code 85250 |
|--------------------|-------------|-------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Jolly Cannabis | Occupation (for Individual) President |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1563.13

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 16 | | 2026 |

Transaction ID : SA11AI.5136

Amount of Each Receipt this Period

| |
|---------|
| 1041.98 |
|---------|

Memo Item

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

Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
33703.58

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 16 | | 2026 |

Transaction ID : SA11AI.5136.0

Amount of Each Receipt this Period

| |
|---------|
| 1041.98 |
|---------|

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1041.98 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 24 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Grady, John, , ,

Mailing Address **2405 State Hwy K**

| | | |
|------------------------|--------------------|--------------------------|
| City Hermann | State MO | Zip Code 65041 |
|------------------------|--------------------|--------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) None | Occupation (for Individual) Retired |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.21

Date of Receipt
02 / 16 / 2026

Transaction ID : SA11AI.5129

Amount of Each Receipt this Period
104.48

Memo Item

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

Mailing Address **4250 Fairfax Dr Ste 600**

| | | |
|--------------------------|--------------------|--------------------------|
| City Arlington | State VA | Zip Code 22203 |
|--------------------------|--------------------|--------------------------|

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 ▼
31561.60

Date of Receipt
02 / 16 / 2026

Transaction ID : SA11AI.5129.0

Amount of Each Receipt this Period
104.48

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Hempyre, LLC

Mailing Address **15403 Electra Circle**

| | | |
|----------------------------|--------------------|--------------------------|
| City San Antonio | State TX | Zip Code 78245 |
|----------------------------|--------------------|--------------------------|

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 ▼
500.00

Date of Receipt
02 / 16 / 2026

Transaction ID : SA11AI.5111

Amount of Each Receipt this Period
250.00

Memo Item

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 354.48 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 11 OF 24 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

A. WinRed
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
30195.13

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2026
Transaction ID : SA11AI.5111.0

Amount of Each Receipt this Period
250.00

Memo Item

B. Karazin, Chris, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1803 Garner Station Blvd

| | | |
|-----------------|-------------|-------------------|
| City Raleigh | State NC | Zip Code 27603 |
|-----------------|-------------|-------------------|

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

Name of Employer (for Individual) Occupation (for Individual)
Carolindica Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1760.73

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2026
Transaction ID : SA11AI.5116

Amount of Each Receipt this Period
750.00

Memo Item

C. WinRed
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
30966.28

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2026
Transaction ID : SA11AI.5116.0

Amount of Each Receipt this Period
750.00

Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 750.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 24 |
| | <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)
Hemp Industry & Farmers of America

| | | | | | |
|---|-------------|--------------------------------------|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Karazin, Chris, , , | | | Date of Receipt MM / DD / YYYY 02 / 28 / 2026 | | |
| Mailing Address 1803 Garner Station Blvd | | | Transaction ID : SA11AI.5223 | | |
| City Raleigh | State NC | Zip Code 27603 | Amount of Each Receipt this Period 260.73 | | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item | | |
| Name of Employer (for Individual) Carolindica | | Occupation (for Individual) Owner | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 2021.46 | | | |

| | | | | | |
|---|-------------|--------------------------------------|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WinRed | | | Date of Receipt MM / DD / YYYY 02 / 28 / 2026 | | |
| Mailing Address 4250 Fairfax Dr Ste 600 | | | Transaction ID : SA11AI.5223.0 | | |
| City Arlington | State VA | Zip Code 22203 | Amount of Each Receipt this Period 260.73 | | |
| FEC ID number of contributing federal political committee. C | | | <input checked="" type="checkbox"/> Memo Item | | |
| Name of Employer (for Individual) | | Occupation (for Individual) | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 36934.63 | | | |

| | | | | | |
|---|-------------|--------------------------------------|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Luke, Jody, , , | | | Date of Receipt MM / DD / YYYY 02 / 16 / 2026 | | |
| Mailing Address 15114 Alijon Ct | | | Transaction ID : SA11AI.5121 | | |
| City Charlotte | State NC | Zip Code 28278 | Amount of Each Receipt this Period 104.48 | | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item | | |
| Name of Employer (for Individual) PureRemedies CBD | | Occupation (for Individual) Owner | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 1146.46 | | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 365.21 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 13 OF 24 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

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

Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
31175.24

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 16 | / | 2026 |

Transaction ID : SA11AI.5121.0

Amount of Each Receipt this Period
104.48

Memo Item

B. McMillan, James, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9704 Two Notch Rd

| | | |
|------------------|-------------|-------------------|
| City Columbia | State SC | Zip Code 29223 |
|------------------|-------------|-------------------|

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

| | |
|---|--------------------------------------|
| Name of Employer (for Individual) The Advancd Apothecary | Occupation (for Individual) Owner |
|---|--------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.96

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 24 | / | 2026 |

Transaction ID : SA11AI.5199

Amount of Each Receipt this Period
104.48

Memo Item

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

Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
36621.50

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 24 | / | 2026 |

Transaction ID : SA11AI.5199.0

Amount of Each Receipt this Period
104.48

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 104.48 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 24 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Newton, Christopher, , , | | Date of Receipt MM / DD / YYYY 02 / 16 / 2026 |
| Mailing Address 9540 N Kenwood Ave | | Transaction ID : SA11AI.5108 |
| City Indianapolis | State IN | Zip Code 46260 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1041.98 |
| Name of Employer (for Individual) CR Health, LLC | Occupation (for Individual) Business Development | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1041.98 | |

| | | |
|---|--------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WinRed | | Date of Receipt MM / DD / YYYY 02 / 16 / 2026 |
| Mailing Address 4250 Fairfax Dr Ste 600 | | Transaction ID : SA11AI.5108.0 |
| City Arlington | State VA | Zip Code 22203 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1041.98 |
| Name of Employer (for Individual) | Occupation (for Individual) | <input checked="" type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 29945.13 | |

| | | |
|---|--------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Salganik, Kallan, , , | | Date of Receipt MM / DD / YYYY 02 / 16 / 2026 |
| Mailing Address 3715 Franklin Ave | | Transaction ID : SA11AI.5134 |
| City Waco | State TX | Zip Code 76710 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer (for Individual) Salganik Services, Inc. | Occupation (for Individual) Owner | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 2000.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2041.98 |
| TOTAL This Period (last page this line number only)..... | |

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

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

FOR LINE NUMBER: PAGE 15 OF 24
(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)
Hemp Industry & Farmers of America

A. WinRed
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
32661.60

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2026
Transaction ID : SA11AI.5134.0

Amount of Each Receipt this Period
1000.00

Memo Item

B. Vantine, Lee, , , II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19701 Bethel Church Rd

| | | |
|-------------------|-------------|-------------------|
| City Cornelius | State NC | Zip Code 28031 |
|-------------------|-------------|-------------------|

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

Name of Employer (for Individual) Occupation (for Individual)
HH North LLC Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5208.65

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2026
Transaction ID : SA11AI.5097

Amount of Each Receipt this Period
5208.65

Memo Item

C. WinRed
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
5208.65

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2025
Transaction ID : SA11AI.5097.0

Amount of Each Receipt this Period
5208.65

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5208.65 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 24 |
| | <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)
Hemp Industry & Farmers of America

A. Weber, Jeremy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3137 W Maple
 City Wichita State KS Zip Code 67213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hemp Retailer Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **521.15**

Date of Receipt **02 / 16 / 2026**
Transaction ID : SA11AI.5105
 Amount of Each Receipt this Period **521.15**
 Memo Item

B. WinRed
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4250 Fairfax Dr Ste 600
 City Arlington State VA Zip Code 22203
 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 **28903.15**

Date of Receipt **02 / 16 / 2026**
Transaction ID : SA11AI.5105.0
 Amount of Each Receipt this Period **521.15**
 Memo Item

C. Weir, Zach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2082
 City Huntington State WV Zip Code 25721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Goldsmit Sydnor Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.73**

Date of Receipt **02 / 16 / 2026**
Transaction ID : SA11AI.5099
 Amount of Each Receipt this Period **260.73**
 Memo Item

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 781.88 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

| | |
|---|------------------------------|
| FOR LINE NUMBER: (check only one) | PAGE 17 OF 24 |
| <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)
Hemp Industry & Farmers of America

A. WinRed

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

Mailing Address 4250 Fairfax Dr Ste 600

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
|-------------------|-------------|-------------------|

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 ▼
28121.27

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2026

Transaction ID : SA11AI.5099.0

Amount of Each Receipt this Period
260.73

Memo Item

B.

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

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

Amount of Each Receipt this Period

Memo Item

C.

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

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

Amount of Each Receipt this Period

Memo Item

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | 14400.23 |

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

| | | | |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 18 OF 24 |
| <input 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 checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

A. Apotheca
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1223 E Dixie Dr Ste B

| | | |
|------------------|-------------|-------------------|
| City Asheboro | State NC | Zip Code 27203 |
|------------------|-------------|-------------------|

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 ▼
40000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 11 | / | 2026 |

Transaction ID : SA17.5207

Amount of Each Receipt this Period
20000.00

Memo Item
Non Contribution Account

B. Apotheca
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1223 E Dixie Dr Ste B

| | | |
|------------------|-------------|-------------------|
| City Asheboro | State NC | Zip Code 27203 |
|------------------|-------------|-------------------|

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 ▼
60000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 27 | / | 2026 |

Transaction ID : SA17.5239

Amount of Each Receipt this Period
20000.00

Memo Item
Non Contribution Account

C. Bay Smokes
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 62 NE 167th St

| | | |
|---------------|-------------|-------------------|
| City Miami | State FL | Zip Code 33162 |
|---------------|-------------|-------------------|

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 ▼
20000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 13 | / | 2026 |

Transaction ID : SA17.5211

Amount of Each Receipt this Period
20000.00

Memo Item
Non Contribution Account

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 60000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 19 OF 24 |
| <input 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 checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

A. Bay Smokes
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 62 NE 167th St

| | | |
|---------------|-------------|-------------------|
| City Miami | State FL | Zip Code 33162 |
|---------------|-------------|-------------------|

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 ▼
40000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 27 | | 2026 |

Transaction ID : SA17.5238

Amount of Each Receipt this Period
20000.00

Memo Item
Non Contribution Account

B. Big Sky
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 370 25th Rd NW

| | | |
|-----------------|-------------|-------------------|
| City Choteau | State MT | Zip Code 59422 |
|-----------------|-------------|-------------------|

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 ▼
40000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 19 | | 2026 |

Transaction ID : SA17.5214

Amount of Each Receipt this Period
20000.00

Memo Item
Non Contribution Account

C. FLM Hemp Solutions, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2300 One America Sw

| | | |
|----------------------|-------------|-------------------|
| City Indianapolis | State IN | Zip Code 46282 |
|----------------------|-------------|-------------------|

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 ▼
25000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 03 | | 2026 |

Transaction ID : SA17.5209

Amount of Each Receipt this Period
25000.00

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 65000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 20 OF 24 |
| <input 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 checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

A. FM Labs
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1285 Factory Cir

| | | |
|---------------------|-------------|-------------------|
| City Fort Lupton | State CO | Zip Code 80621 |
|---------------------|-------------|-------------------|

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 ▼
40000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 17 | / | 2026 |

Transaction ID : SA17.5212

Amount of Each Receipt this Period
20000.00

Memo Item
Non Contribution Account

B. L&K Distribution
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 222 South Harbor Blvd Ste 530

| | | |
|-------------------|-------------|-------------------|
| City Santa Ana | State CA | Zip Code 92704 |
|-------------------|-------------|-------------------|

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 ▼
40000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 18 | / | 2026 |

Transaction ID : SA17.5213

Amount of Each Receipt this Period
20000.00

Memo Item
Non Contribution Account

C. The Pack Labs
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6060 Kells Lane

| | | |
|-----------------|-------------|-------------------|
| City Milford | State OH | Zip Code 45150 |
|-----------------|-------------|-------------------|

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 ▼
10000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 25 | / | 2026 |

Transaction ID : SA17.5215

Amount of Each Receipt this Period
10000.00

Memo Item
Non Contribution Account

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50000.00 |
| TOTAL This Period (last page this line number only).....▶ | 175000.00 |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

Full Name (Last, First, Middle Initial)

A. WinRed Technical Services

Mailing Address PO Box 9891

City
Arlington

State
VA

Zip Code
22219

Purpose of Disbursement
PAC CC Transaction Fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 0 | 2 | | 2 | 0 | 2 | 6 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4843

Amount of Each Disbursement this Period

| | |
|------------|-------|
| [REDACTED] | 25.63 |
|------------|-------|

Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical Services

Mailing Address PO Box 9891

City
Arlington

State
VA

Zip Code
22219

Purpose of Disbursement
PAC CC Transaction Fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5141

Amount of Each Disbursement this Period

| | |
|------------|--------|
| [REDACTED] | 451.37 |
|------------|--------|

Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical Services

Mailing Address PO Box 9891

City
Arlington

State
VA

Zip Code
22219

Purpose of Disbursement
PAC CC Transaction Fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | | 2 | 4 | | 2 | 0 | 2 | 6 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5203

Amount of Each Disbursement this Period

| | |
|------------|--------|
| [REDACTED] | 115.84 |
|------------|--------|

Memo Item

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

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

| | |
|------------|--------|
| [REDACTED] | 592.84 |
|------------|--------|

| | |
|------------|--|
| [REDACTED] | |
|------------|--|

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

Full Name (Last, First, Middle Initial)

A. WinRed Technical Services

Mailing Address PO Box 9891

City
Arlington

State
VA

Zip Code
22219

Purpose of Disbursement
PAC CC Transaction Fees

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 M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 28 | | 2026 |

FEC Identification Number

C []

Transaction ID : SB21B.5230

Amount of Each Disbursement this Period

[] 13.43 []

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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 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

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 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)..... ▶

[] 13.43 []

[] 606.27 []

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

Full Name (Last, First, Middle Initial)

A. Carson Consulting

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 19 | | 2026 |

Mailing Address 800 New Jersey Ave SE
Apt 832

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Strategy Consulting-Non Contribution Account

Candidate Name

Category/
Type

FEC Identification Number

C []

Transaction ID : SB29.5142

Amount of Each Disbursement this Period

[] 15000.00

Memo Item

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

Full Name (Last, First, Middle Initial)

B. Classic City Bank

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 23 | | 2026 |

Mailing Address 2365 W Broad St

City Athens State GA Zip Code 30606

Purpose of Disbursement
PAC Bank Fee-Non Contribution Account

Candidate Name

Category/
Type

FEC Identification Number

C []

Transaction ID : SB29.5194

Amount of Each Disbursement this Period

[] 20.00

Memo Item

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

Full Name (Last, First, Middle Initial)

C. FM Labs

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 17 | | 2026 |

Mailing Address 1285 Factory Cir

City Fort Lupton State CO Zip Code 80621

Purpose of Disbursement
PAC Accounting Fees-Non Contribution Account

Candidate Name

Category/
Type

FEC Identification Number

C []

Transaction ID : SB29.5240

Amount of Each Disbursement this Period

[] 2500.00

Memo Item

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

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

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

[] 17520.00

[]

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Ohioans for Cannabis Choice | | Date of Disbursement MM / DD / YYYY 02 / 23 / 2026 |
| Mailing Address 545 East Town St | | FEC Identification Number C Transaction ID : SB29.5192 Amount of Each Disbursement this Period 20000.00 |
| City Columbus | State OH | |
| Zip Code 43215 | Purpose of Disbursement Contribution-Non Contribution Acct | Memo Item <input type="checkbox"/> |
| 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. Professional Data Services | | Date of Disbursement MM / DD / YYYY 02 / 23 / 2026 |
| Mailing Address 824 S Milledge Ave Ste 101 | | FEC Identification Number C Transaction ID : SB29.5191 Amount of Each Disbursement this Period 5572.30 |
| City Athens | State GA | |
| Zip Code 30605 | Purpose of Disbursement PAC Compliance Consulting-Non Contribution Acct | Memo Item <input type="checkbox"/> |
| 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. Swensen, Brian, , , | | Date of Disbursement MM / DD / YYYY 02 / 25 / 2026 |
| Mailing Address 2464 SW Omega Way | | FEC Identification Number C Transaction ID : SB29.5206 Amount of Each Disbursement this Period 30000.00 |
| City Stuart | State FL | |
| Zip Code 34997 | Purpose of Disbursement PAC Strategy Consulting-Non Contribution Account | Memo Item <input type="checkbox"/> |
| 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).....▶ | 55572.30 |
| TOTAL This Period (last page this line number only).....▶ | 73092.30 |