

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

RALPH NORMAN FOR CONGRESS

ADDRESS (number and street)

PO BOX 37467



Check if different than previously reported. (ACC)

ROCK HILL

SC

29732-0524

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00633610

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

SC

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
05 / 23 / 2024

through

M M / D D / Y Y Y Y
06 / 30 / 2024

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 BLACKWELL, MARGARETT, , MRS.,

Signature of Treasurer

BLACKWELL, MARGARETT, , MRS.,

Date

M M / D D / Y Y Y Y
07 / 15 / 2024

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

RALPH NORMAN FOR CONGRESS

Report Covering the Period: From: 05 / 23 / 2024 To: 06 / 30 / 2024

	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))	35352.52	308754.22
(b) Total Contribution Refunds (from Line 20(d))	0.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	35352.52	308504.22
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7431.13	122746.10
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	1637.01
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7431.13	121109.09
8. Cash on Hand at Close of Reporting Period (from Line 27)	602695.71	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

RALPH NORMAN FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
05 / 23 / 2024

To:

MM / DD / YYYY
06 / 30 / 2024**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).....

4832.52

112937.52

(ii) Unitemized

520.00

28316.70

(iii) TOTAL of contributions
from individuals ▶

5352.52

141254.22

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

30000.00

167500.00

(d) The Candidate

0.00

0.00

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

35352.52

308754.22

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

1637.01

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

0.00

1300.00

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

35352.52

311691.23

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.....

7431.13

122746.10

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

250.00

(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

250.00

21. OTHER DISBURSEMENTS

0.00

140100.00

22. **TOTAL DISBURSEMENTS**

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

7431.13

263096.10

III. CASH SUMMARY

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

574774.32

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

35352.52

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

610126.84

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

7431.13

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

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

602695.71

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

PAGE 5 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

MITCHELL, MARLENE, AARON, MRS.,

A. Mailing Address PO BOX 36542

City

ROCK HILL

State

SC

Zip Code

29732-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1052.52

Date of Receipt

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

Transaction ID : AA26E5DE8DE07404892C

Amount of Each Receipt this Period

13.60

☐ Memo Item

IN-KIND:POSTAGE

B. Full Name (Last, First, Middle Initial)
MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City

ROCK HILL

State

SC

Zip Code

29732-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1052.52

Date of Receipt

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

Transaction ID : AE817DCF5AEB9438BA5F

Amount of Each Receipt this Period

171.20

☐ Memo Item

IN-KIND:EVENT EQUIPMENT RENTAL

C. Full Name (Last, First, Middle Initial)
MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City

ROCK HILL

State

SC

Zip Code

29732-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1052.52

Date of Receipt

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

Transaction ID : A0CBC9E30A7A84BED987

Amount of Each Receipt this Period

77.84

☐ Memo Item

IN-KIND:EVENT TICKETS

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

262.64

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

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

PAGE 6 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

MITCHELL, MARLENE, AARON, MRS.,

A. Mailing Address PO BOX 36542

City

ROCK HILL

State

SC

Zip Code

29732-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1052.52

Date of Receipt

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

Transaction ID : AAE129F59906F4F70B3E

Amount of Each Receipt this Period

43.38

☐ Memo Item

IN-KIND:EVENT CATERING

B.

Full Name (Last, First, Middle Initial)

MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City

ROCK HILL

State

SC

Zip Code

29732-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1052.52

Date of Receipt

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

Transaction ID : A3300E7ECE6C445808F6

Amount of Each Receipt this Period

14.22

☐ Memo Item

IN-KIND:SOFTWARE

C.

Full Name (Last, First, Middle Initial)

MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City

ROCK HILL

State

SC

Zip Code

29732-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1052.52

Date of Receipt

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

Transaction ID : A6ADC93FB36D74F09A54

Amount of Each Receipt this Period

39.86

☐ Memo Item

IN-KIND:EVENT TICKETS

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

97.46

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

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

PAGE 7 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

MAYNARD, JAMES, , DR.,

A. Mailing Address 4476 MOUNT GALLANT ROAD

City

ROCK HILL

State

SC

Zip Code

29732

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	4

Transaction ID : A46A23E135F82421FB9F

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MITCHELL, MARLENE, AARON, MRS.,

B. Mailing Address PO BOX 36542

City

ROCK HILL

State

SC

Zip Code

29732-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1052.52

Date of Receipt

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

Transaction ID : A3AD9D3E43AFA4143926

Amount of Each Receipt this Period

39.58

☐ Memo Item

IN-KIND:NAME TENTS

Full Name (Last, First, Middle Initial)

MITCHELL, MARLENE, AARON, MRS.,

C. Mailing Address PO BOX 36542

City

ROCK HILL

State

SC

Zip Code

29732-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1052.52

Date of Receipt

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

Transaction ID : AF1F007BAF65B4CB69E4

Amount of Each Receipt this Period

77.84

☐ Memo Item

IN-KIND:EVENT TICKETS

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

367.42

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

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

PAGE 8 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

DACEY, SCOTT, , ,

A.

Mailing Address 139 TRENT SHORES DR.

City

NEW BERN

State

NC

Zip Code

28562

FEC ID number of contributing
federal political committee.

C

Name of Employer

PACE GOVT RELATIONS

Occupation

LOBBYIST

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		12		2024

Transaction ID : A9FE666D9D3D7497DA8D

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

27199.36

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		12		2024

Transaction ID : A80BA9C2C521A46489BE

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

FEDELE, MIKE, , ,

C.

Mailing Address 1585 MEADOWDALE ROAD

City

ROCK HILL

State

SC

Zip Code

29732-8123

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		03		2024

Transaction ID : A4A46C84405494E978E5

Amount of Each Receipt this Period

200.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

700.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 27	
	☒ 11a	☐ 11b	☐ 11c	☐ 11d
	☐ 12	☐ 13a	☐ 13b	☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt MM / DD / YYYY 06 / 03 / 2024	
Mailing Address PO BOX 9891			Transaction ID : A699EA815955441ACBD8	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Memo Item INTERMEDIARY		
Name of Employer		Occupation	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.	
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date 27199.36		

Full Name (Last, First, Middle Initial) SALAS, MARTIN, , ,			Date of Receipt MM / DD / YYYY 06 / 30 / 2024	
Mailing Address 498 PARAHAM RD S			Transaction ID : A5E3980F5FDC04FD29E6	
City YORK	State SC	Zip Code 29745	Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer DOGWOOD LANE CHILDRENS ACADEMY		Occupation MANAGER	EARMARKED (NON-DIRECTED) THROUGH WINRED	
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 2900.00		

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt MM / DD / YYYY 06 / 30 / 2024	
Mailing Address PO BOX 9891			Transaction ID : AB2A94A0E1EAF4009A60	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		Memo Item INTERMEDIARY		
Name of Employer		Occupation	TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.	
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 27199.36		

SUBTOTAL of Receipts This Page (optional).....▶	2900.00
TOTAL This Period (last page this line number only).....▶	

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

PAGE 10 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

SANDGREN, MATT, , ,

A.

Mailing Address PO BOX 7247

City

WASHINGTON

State

DC

Zip Code

20044

FEC ID number of contributing
federal political committee.

C

Name of Employer

INNOVATIVE POLICY, PLLC

Occupation

ATTORNEY - LOBBYIST

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	4

Transaction ID : AF9297D6A59FA433FB7E

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

27199.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	4

Transaction ID : A4DD7B5E123C9445E836

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MARINKO, TOM, , ,

C.

Mailing Address 349 YOUNGS BEND RD

City

KERSHAW

State

SC

Zip Code

29067-8121

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

215.00

Date of Receipt

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

Transaction ID : A8F42E33281B141D19D9

Amount of Each Receipt this Period

5.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

505.00

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

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

PAGE 11 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED

A. Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891

Date of Receipt

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

Transaction ID : AA503A129165246DC94B

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

27199.36

Amount of Each Receipt this Period

5.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

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

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

0.00
4832.52

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

PAGE 12 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE FIREARM INDUSTRY TRADE ASSOCIATION PAC**A.**

Mailing Address 400 NORTH CAPITAL STREET NW

SUITE 475

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.**C** C00480863

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A1C7C679E58494380888

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

NARPM PAC**B.**

Mailing Address 638 INDEPENDENCE PARKWAY

SUITE 100

City

CHESAPEAKE

State

VA

Zip Code

23320

FEC ID number of contributing
federal political committee.**C** C00567792

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	4

Transaction ID : A3A099910CC9B401DA1A

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE**C.**

Mailing Address 1061 AMERICAN LANE

City

SCHAUMBURG

State

IL

Zip Code

60173

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

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

Transaction ID : AA604892459474207B23

Amount of Each Receipt this Period

1000.00



Memo Item

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

3000.00

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

PAGE 13 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

RESOLUTE FOREST PRODUCTS US INC. POLITICAL ACTION COMMITTEEMailing Address 1950 ROLAND CLARKE PLACE
SUITE 300City
RESTONState
VAZip Code
20191FEC ID number of contributing
federal political committee.**C** C00350884

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		03		2024

Transaction ID : A1CD17DADFC88416D91A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL RD

City
FAIRFAXState
VAZip Code
22030-7550FEC ID number of contributing
federal political committee.**C** C00053553

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		03		2024

Transaction ID : A36E9490DE95C42B69D8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEEMailing Address 1919 M STREET
5TH FLOORCity
WASHINGTONState
DCZip Code
20036FEC ID number of contributing
federal political committee.**C** C00004812

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		28		2024

Transaction ID : A3427BE30ACE74B71B51

Amount of Each Receipt this Period

1500.00

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

3500.00

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

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

PAGE 14 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL APARTMENT ASSOCIATION PAC

A.

Mailing Address 4300 WILSON BOULEVARD
SUITE 800City
ARLINGTONState
VAZip Code
22203-4213FEC ID number of contributing
federal political committee.

C C00113241

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2024

Transaction ID : A3D36CE97DF93428C931

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS PAC

B.

Mailing Address 430 N MICHIGAN AVE

City
CHICAGOState
ILZip Code
60611-4011FEC ID number of contributing
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 10 / 2024

Transaction ID : A43320C203D8E4E4F8B6

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE

C.

Mailing Address 1000 WILSON BLVD

City
ARLINGTONState
VAZip Code
22209-3927FEC ID number of contributing
federal political committee.

C C00005249

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 28 / 2024

Transaction ID : A9D9980827CAF4785A85

Amount of Each Receipt this Period

2500.00

☐ Memo Item

10000.00

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

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

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

PAGE 15 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

STAND FOR AMERICA PAC

A.

Mailing Address 601 NEW JERSEY AVENUE NW

SUITE 620

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00765982

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

Transaction ID : AB9527C15A3814684801

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 TENTH STREET NW

TWO CITY CENTER, SUITE 400

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00106146

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	4

Transaction ID : AA2A95D415DB845E9B68

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1333 NEW HAMPSHIRE AVENUE NW

SUITE 700

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	4

Transaction ID : AB78C48E929AA4E01894

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

7000.00

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

PAGE 16 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMPSON COBURN POLITICAL ACTION COMMITTEE**A.**

Mailing Address ONE US BANK PLAZA

City

SAINT LOUIS

State

MO

Zip Code

63101

FEC ID number of contributing
federal political committee.**C** C00550491

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	4

Transaction ID : AE146AD5B9A544ECEA5F

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

SYLVAMO CORPORATION PACMailing Address 1300 I STREET
SUITE 400E

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00789602

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

Transaction ID : A1EB97BD3C6D9409F9FD

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

SOUTH CAROLINA FARM BUREAU FEDERATION PAC

Mailing Address P. O. BOX 754

City

COLUMBIA

State

SC

Zip Code

29202

FEC ID number of contributing
federal political committee.**C** C00629766

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	4

Transaction ID : A48798F4FF83342AEBA4

Amount of Each Receipt this Period

3500.00



Memo Item

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

5500.00

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

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

PAGE 17 OF 27

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

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN SECURITIES ASSOCIATION PAC

Mailing Address 1455 PENNSYLVANIA AVENUE NW
SUITE 400City
WASHINGTONState
DCZip Code
20004

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		03		2024

Transaction ID : A6FC518F7C8A94FD6962

FEC ID number of contributing
federal political committee.

C C00618116

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Date of Receipt

M M	/	D D	/	Y Y Y Y

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Date of Receipt

M M	/	D D	/	Y Y Y Y

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

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

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

1000.00

30000.00

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

PAGE 18 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

Date of Disbursement

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

City
ROCK HILLState
SCZip Code
29732-0509

FEC Identification Number

C

Purpose of Disbursement
IN-KIND:POSTAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

13.60

Transaction ID : BA26E5DE8DE07404892C

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

Date of Disbursement

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

City
ROCK HILLState
SCZip Code
29732-0509

FEC Identification Number

C

Purpose of Disbursement
IN-KIND:EVENT EQUIPMENT RENTAL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

171.20

Transaction ID : BE817DCF5AEB9438BA5F

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

Date of Disbursement

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

City
ROCK HILLState
SCZip Code
29732-0509

FEC Identification Number

C

Purpose of Disbursement
IN-KIND:EVENT TICKETS

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

77.84

Transaction ID : B0CBC9E30A7A84BED987

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

262.64

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

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

PAGE 19 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City
ROCK HILLState
SCZip Code
29732-0509Purpose of Disbursement
IN-KIND:EVENT CATERING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

43.38

Transaction ID : BAE129F59906F4F70B3E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City
ROCK HILLState
SCZip Code
29732-0509Purpose of Disbursement
IN-KIND:SOFTWARE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

14.22

Transaction ID : B3300E7ECE6C445808F6

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City
ROCK HILLState
SCZip Code
29732-0509Purpose of Disbursement
IN-KIND:EVENT TICKETS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.86

Transaction ID : B6ADC93FB36D74F09A54

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

97.46

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

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

PAGE 20 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City
ROCK HILLState
SCZip Code
29732-0509Purpose of Disbursement
IN-KIND:NAME TENTS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.58

Transaction ID : B3AD9D3E43AFA4143926

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MITCHELL, MARLENE, AARON, MRS.,

Mailing Address PO BOX 36542

City
ROCK HILLState
SCZip Code
29732-0509Purpose of Disbursement
IN-KIND:EVENT TICKETS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

77.84

Transaction ID : BF1F007BAF65B4CB69E4

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BLACKWELL, MARGARETT, , MRS.,

Mailing Address 5430 BAKER LN

City
LAKE WYLIEState
SCZip Code
29710-9269Purpose of Disbursement
ADMINISTRATIVE CONSULTING/BOOKKEEPING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

675.00

Transaction ID : B66969A8FD9B74490B96

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

792.42

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

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

PAGE 21 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CITY OF ROCK HILL

Mailing Address P. O. BOX 63039

City
CHARLOTTEState
NCZip Code
28263-3039Purpose of Disbursement
UTILITIES

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

77.96

Transaction ID : B1886DC660DB0492FB2E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ARISTOTLE INTERNATIONAL INC.

Mailing Address P. O. BOX 716045

City
PHILADELPHIAState
PAZip Code
19171Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2407.50

Transaction ID : BF5936661B07E475FA5D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ARISTOTLE INTERNATIONAL INC.

Mailing Address P. O. BOX 716045

City
PHILADELPHIAState
PAZip Code
19171Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

157.50

Transaction ID : B785124D0C5104A609AB

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

2642.96

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

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

PAGE 22 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GAULT, FREDDIE, , ,

Mailing Address 403 GLENDALE ROAD

City
UNIONState
SCZip Code
29379-9184Purpose of Disbursement
EXPENSE REIMB- TRAVEL: NO VENDORS REQ. ITEM.

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

251.82

Transaction ID : B060C6B533BC24548BD2

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BLACKWELL, MARGARETT, , MRS.,

Mailing Address 5430 BAKER LN

City
LAKE WYLIEState
SCZip Code
29710-9269Purpose of Disbursement
ADMINISTRATIVE CONSULTING/BOOKKEEPING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

630.00

Transaction ID : B8A84E97ACD9448C0982

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
EARMARK PROCESSING

003

Candidate Name

WINRED

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	4

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

163.51

Transaction ID : B56163151B0EE441DB5C

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

1045.33

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

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

PAGE 23 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BARCLAYS MASTERCARD

Mailing Address PO BOX 13337

City
PHILADELPHIAState
PAZip Code
19101Purpose of Disbursement
CREDIT CARD PAYMENT- SEE MEMOS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1056.49

Transaction ID : BDE473C1F0AED4965865

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OFFICE DEPOT

Mailing Address 2349 CHERRY RD.

City
ROCK HILLState
SCZip Code
29730Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

60.98

Transaction ID : B680FBF2619F3410495F

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. OFFICE DEPOT

Mailing Address 2349 CHERRY RD.

City
ROCK HILLState
SCZip Code
29730Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

90.62

Transaction ID : B8EF7ECCC8547423E98B

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

1056.49

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

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

PAGE 24 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPITHEATRE PKWY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

61.64

Transaction ID : B8B7BA06B74E94247915

☒ Memo Item**B. AMTRAK**

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001-1401Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

494.00

Transaction ID : BF53F3224531C49D5A40

☒ Memo Item**C. USPS**

Mailing Address 2191 EBENEZER RD.

City
ROCK HILLState
SCZip Code
29732Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

20.16

Transaction ID : B3204F7BC534248EE9EC

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

0.00

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

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

PAGE 25 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 2349 CHERRY RD.

City
ROCK HILLState
SCZip Code
29730Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

16.24

Transaction ID : B080F6362C4CF40F9B6F

☒ Memo Item**B. BARCLAYS MASTERCARD**

Mailing Address PO BOX 13337

City
PHILADELPHIAState
PAZip Code
19101Purpose of Disbursement
CREDIT CARD PAYMENT- SEE MEMOS

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒ Primary	☐ General
☐	Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

889.53

Transaction ID : BF014AB0B448B44CB8C3

☐ Memo Item**C. GOOD STUFF EATERY**

Mailing Address 303 PENNSYLVANIA AVE SE

City
WASHINGTONState
DCZip Code
20003-1148Purpose of Disbursement
EVENT CATERING

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒ Primary	☐ General
☐	Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

536.97

Transaction ID : BB3AD2B0587424348A08

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

889.53

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

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

PAGE 26 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAILCHIMPMailing Address 675 PONCE DE LEON AVE. NE
STE. 5000City
ATLANTAState
GAZip Code
30308Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

98.44

Transaction ID : B1B9D93BBE680452FAD0

☒ Memo Item**B. OFFICE DEPOT**

Mailing Address 2349 CHERRY RD.

City
ROCK HILLState
SCZip Code
29730Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

49.21

Transaction ID : BA83F71817B7E4F54B9F

☒ Memo Item**C. CITY OF ROCK HILL**

Mailing Address P. O. BOX 63039

City
CHARLOTTEState
NCZip Code
28263-3039Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

72.46

Transaction ID : B74C45B74DE5F439685F

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

0.00

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

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

PAGE 27 OF 27

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RALPH NORMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPITHEATRE PKWY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

61.64

Transaction ID : B12D6670A7B7D48B08BD

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

0.00

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

6786.83