

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

HOUSE CONSERVATIVES FUND

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="2025"/>		58555.76
(b) Cash on Hand at Beginning of Reporting Period.....	105636.24	
(c) Total Receipts (from Line 19)	411646.27	514968.96
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	517282.51	573524.72
7. Total Disbursements (from Line 31).....	286826.83	343069.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	230455.68	230455.68
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	

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

HOUSE CONSERVATIVES FUND

Report Covering the Period: From: 03 / 01 / 2025 To: 06 / 30 / 2025

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).....	35480.79	55738.63
(ii) Unitemized	62507.54	103916.98
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	97988.33	159655.61
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	282000.00	302000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	379988.33	461655.61
12. Transfers From Affiliated/Other Party Committees.....	31657.94	53313.35
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	411646.27	514968.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	411646.27	514968.96

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	223847.85	266368.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	223847.85	266368.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	53500.00	65500.00
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	9478.98	11200.59
(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)).....	9478.98	11200.59
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	286826.83	343069.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	286826.83	343069.04

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)	379988.33	461655.61
34. Total Contribution Refunds (from Line 28(d))	9478.98	11200.59
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	370509.35	450455.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	223847.85	266368.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	223847.85	266368.45

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 6 OF 167
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
HOUSE CONSERVATIVES FUND

A. AUSTIN, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1451 N. MILL CREEK RD.
 City CASPER State WY Zip Code 82604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.20

Date of Receipt 06 / 30 / 2025
Transaction ID : AAD48CEC8CD3F42D1B71
 Amount of Each Receipt this Period 104.10
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 30 / 2025
Transaction ID : AF4E989212AB54E4895F
 Amount of Each Receipt this Period 104.10
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. BELANGER, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3041 EAGLES NEST WAY
 City PORT SAINT LUCIE State FL Zip Code 34952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3303.05

Date of Receipt 04 / 13 / 2025
Transaction ID : AEF593CF4F18246CBAAB
 Amount of Each Receipt this Period 3299.40
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	3403.50
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 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
04 / 13 / 2025
Transaction ID : A1EC51498783B40F1979

Amount of Each Receipt this Period
3299.40

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. BELANGER, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3041 EAGLES NEST WAY

City PORT SAINT LUCIE	State FL	Zip Code 34952
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3303.05

Date of Receipt
04 / 13 / 2025
Transaction ID : ACD2A39064C054FDF881

Amount of Each Receipt this Period
3.65

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
04 / 13 / 2025
Transaction ID : A64E33DC8459946F2BDC

Amount of Each Receipt this Period
3.65

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	3.65
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 8 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. BOX, BROOKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 MOHLE DR
 City AUSTIN State TX Zip Code 78703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 17 / 2025
Transaction ID : A26DCFFEDAAD24D1C8E1
 Amount of Each Receipt this Period 47.00
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 17 / 2025
Transaction ID : A7E238EB887084AFD944
 Amount of Each Receipt this Period 47.00
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

C. CHOO, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3560 SUNSET DRIVE WEST
 City UNIVERSITY PLACE State WA Zip Code 98466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2025
Transaction ID : A3312696561D348F2B92
 Amount of Each Receipt this Period 50.00
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶ 97.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 9 OF 167
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
[X] 11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891
City ARLINGTON State VA Zip Code 22219
FEC ID number of contributing federal political committee. C C00694323
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: 2025
[] Primary [] General
[X] Other (specify) ANNUAL
Aggregate Year-to-Date 119261.06

Date of Receipt
05 / 24 / 2025
Transaction ID : A87DBC5223484421FA03
Amount of Each Receipt this Period 50.00
[X] Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. CHOO, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3560 SUNSET DRIVE WEST
City UNIVERSITY PLACE State WA Zip Code 98466
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For:
[] Primary [] General
[] Other (specify)
Aggregate Year-to-Date 300.00

Date of Receipt
06 / 24 / 2025
Transaction ID : AD5750B84E0C34EFFBEE
Amount of Each Receipt this Period 50.00
[] Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891
City ARLINGTON State VA Zip Code 22219
FEC ID number of contributing federal political committee. C C00694323
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: 2025
[] Primary [] General
[X] Other (specify) ANNUAL
Aggregate Year-to-Date 119261.06

Date of Receipt
06 / 24 / 2025
Transaction ID : A386A57708CD04C67863
Amount of Each Receipt this Period 50.00
[X] Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional)..... 50.00
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 10 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. COPOULOS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14058 N. FOUNTAIN HILLS BLVD.
 City FOUNTAIN HILLS State AZ Zip Code 85268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.08

Date of Receipt 05 / 21 / 2025
Transaction ID : AAC1B6CCB4056443D8C8
 Amount of Each Receipt this Period 27.26
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 05 / 21 / 2025
Transaction ID : A304D8B469F7A4DBF979
 Amount of Each Receipt this Period 27.26
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

C. COPOULOS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14058 N. FOUNTAIN HILLS BLVD.
 City FOUNTAIN HILLS State AZ Zip Code 85268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.34

Date of Receipt 06 / 02 / 2025
Transaction ID : A84F8A83ADEE64712BE6
 Amount of Each Receipt this Period 27.26
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	54.52
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 11 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 02 / 2025
Transaction ID : **AD974387D5EF84528B7C**

Amount of Each Receipt this Period
27.26

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. COPOULOS, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14058 N. FOUNTAIN HILLS BLVD.

City FOUNTAIN HILLS	State AZ	Zip Code 85268
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.60

Date of Receipt
06 / 21 / 2025
Transaction ID : **A604ADF0C8B804DDC918**

Amount of Each Receipt this Period
27.26

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 21 / 2025
Transaction ID : **A3712D41A24CD46D7B7F**

Amount of Each Receipt this Period
27.26

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	27.26
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 167
	<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)
HOUSE CONSERVATIVES FUND

A. COWAN, ANSEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8603 OXFORD AVENUE
 City LUBBOCK State TX Zip Code 79423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACRISURE Occupation (for Individual) SURETY BOND AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 09 / 2025
Transaction ID : A1403EB74D6DC4E829B2
 Amount of Each Receipt this Period 47.00
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 09 / 2025
Transaction ID : AC5578EFFC5134D6FB7D
 Amount of Each Receipt this Period 47.00
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

C. DALTON, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 731 PINE ST
 City MEADVILLE State PA Zip Code 16335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HELEN DALTON Occupation (for Individual) HELEN DALTON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3290.00

Date of Receipt 03 / 20 / 2025
Transaction ID : AF989872B78F644F0AEF
 Amount of Each Receipt this Period 3290.00
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶	3337.00
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 13 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
--------------------------	--------------------	--------------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
03 / 20 / 2025

Transaction ID : A05D639F088FA4D5DB5A

Amount of Each Receipt this Period
3290.00

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. DERDERIAN, JAMES, , ,

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

Mailing Address **182 PRINCE GEORGE STREET**

City ANNAPOLIS	State MD	Zip Code 21401
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE STANTON PARK GROUP	Occupation (for Individual) CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **5000.00**

Date of Receipt
03 / 04 / 2025

Transaction ID : AE33A9547384B47E1859

Amount of Each Receipt this Period
5000.00

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
--------------------------	--------------------	--------------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
03 / 04 / 2025

Transaction ID : AA8DFC710D1D740C7AD7

Amount of Each Receipt this Period
5000.00

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 14 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. DEUCHARS, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 N. HAWTHORNE AVE
 City SIOUX FALLS State SD Zip Code 57104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.80

Date of Receipt 06 / 04 / 2025
Transaction ID : AE305C524E19940D0888
 Amount of Each Receipt this Period 27.26
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 04 / 2025
Transaction ID : A51B1841B49E945BBB52
 Amount of Each Receipt this Period 27.26
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

C. DEUCHARS, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 N. HAWTHORNE AVE
 City SIOUX FALLS State SD Zip Code 57104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 206.80

Date of Receipt 06 / 04 / 2025
Transaction ID : ACBC54EB71CDD47948D6
 Amount of Each Receipt this Period 14.10
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶ 41.36
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 15 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2025

Transaction ID : A309C417E25894042BB8

Amount of Each Receipt this Period
14.10

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. EDATTEL, PAUL, , ,

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

Mailing Address 3124 HOLMES RUN RD

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

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

Name of Employer (for Individual) CONSULTANT	Occupation (for Individual) TODD STRATEGY GROUP
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2025

Transaction ID : AF16E8F63084948B6B7E

Amount of Each Receipt this Period
3500.00

Memo Item

C. FERGUSON, MICHAEL, , ,

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

Mailing Address 10811 ALLOWAY DR

City POTOMAC	State MD	Zip Code 20854-1504
-----------------	-------------	------------------------

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

Name of Employer (for Individual) AT&T	Occupation (for Individual) EVP
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2025

Transaction ID : AA3D01C921C1C40EC9C3

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. GARDNER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 WOODLAND SQUARE BLVD, APT 5303
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.10

Date of Receipt 06 / 09 / 2025
Transaction ID : A2948C374F0E24F73808
 Amount of Each Receipt this Period 47.00
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 09 / 2025
Transaction ID : AA122C1717D544FFEB0D
 Amount of Each Receipt this Period 47.00
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. HEAFITZ, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2704 EMMET RD
 City SILVER SPRING State MD Zip Code 20902-4832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCMA Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 28 / 2025
Transaction ID : A2F5DD462FFAA44ADA6C
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1047.00
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 17 OF 167
	<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)
HOUSE CONSERVATIVES FUND

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

Mailing Address **3310 OLD DOMINION BOULEVARD**

City ALEXANDRIA	State VA	Zip Code 22305
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) H&M STRATEGIES	Occupation (for Individual) GOVERNMENT RELATIONS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
03 / 31 / 2025

Transaction ID : A34DD7D073D034B9BA3B

Amount of Each Receipt this Period
1250.00

Memo Item

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

Mailing Address **34 SMARTY JONES CIRCLE**

City MARTINSBURG	State WV	Zip Code 25404
----------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.94

Date of Receipt
05 / 13 / 2025

Transaction ID : A98EDD6B60ED8440BB5E

Amount of Each Receipt this Period
0.94

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For: 2025
 Primary General
 Other (specify)
ANNUAL

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
05 / 13 / 2025

Transaction ID : A4BB3CFCE6ABF46229F7

Amount of Each Receipt this Period
0.94

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	1250.94
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 18 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. HENNINGERPLEGER, VONDALEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 SMARTY JONES CIRCLE
 City MARTINSBURG State WV Zip Code 25404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.88

Date of Receipt 06 / 24 / 2025
Transaction ID : A600155B124884DCB881
 Amount of Each Receipt this Period 0.94
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 24 / 2025
Transaction ID : A3B4206353B384E5BB27
 Amount of Each Receipt this Period 0.94
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. HENNINGERPLEGER, VONDALEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 SMARTY JONES CIRCLE
 City MARTINSBURG State WV Zip Code 25404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 237.82

Date of Receipt 06 / 25 / 2025
Transaction ID : A9660E6427CD043888CB
 Amount of Each Receipt this Period 0.94
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶ 1.88
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:	PAGE 19 OF 167
	(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)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 25 / 2025
Transaction ID : A74C9FFD4A6E7461DADD

Amount of Each Receipt this Period
0.94

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. HENNINGERPLEGER, VONDALEA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 34 SMARTY JONES CIRCLE

City MARTINSBURG	State WV	Zip Code 25404
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.30

Date of Receipt
06 / 29 / 2025
Transaction ID : A5844DC4C0D33484197C

Amount of Each Receipt this Period
2.48

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 29 / 2025
Transaction ID : ACA69542FF6124619A18

Amount of Each Receipt this Period
2.48

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	2.48
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 20 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. HIRSCHMANN, SUSAN, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4875 MAURY LANE
 City ALEXANDRIA State VA Zip Code 22304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS & JENSEN Occupation (for Individual) CHAIRMAN OF THE BOARD/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2025
Transaction ID : A03B3CFAAB34F454CA17
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. HOMES, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 WORTH AVE
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.90

Date of Receipt 04 / 18 / 2025
Transaction ID : A7CDEA5D7CFB745219E0
 Amount of Each Receipt this Period 32.90
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 04 / 18 / 2025
Transaction ID : A39AB0EBDE60C4E348D6
 Amount of Each Receipt this Period 32.90
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional)..... ▶ 5032.90
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 21 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. HOMES, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 WORTH AVE
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 253.80

Date of Receipt 05 / 18 / 2025
Transaction ID : AF8279DE0BF8A49A59D5
 Amount of Each Receipt this Period 32.90
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 05 / 18 / 2025
Transaction ID : A6D8F00080B4B4C43A35
 Amount of Each Receipt this Period 32.90
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

C. HOMES, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 WORTH AVE
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 291.40

Date of Receipt 06 / 08 / 2025
Transaction ID : A45FD2B0B57644617957
 Amount of Each Receipt this Period 23.50
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	56.40
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 22 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
--------------------------	--------------------	--------------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2025

Transaction ID : AA6143BD3E1144FA697B

Amount of Each Receipt this Period

23.50

Memo Item
CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. HOMES, MADELEINE, , ,

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

Mailing Address **401 WORTH AVE**

City PALM BEACH	State FL	Zip Code 33480
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **291.40**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2025

Transaction ID : AC74C48E79F89422DB61

Amount of Each Receipt this Period

14.10

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
--------------------------	--------------------	--------------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2025

Transaction ID : A896C9EC5F84C428DA32

Amount of Each Receipt this Period

14.10

Memo Item
CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	14.10
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 23 OF 167
	(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)
HOUSE CONSERVATIVES FUND

A. HOMES, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 WORTH AVE
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.50

Date of Receipt 06 / 09 / 2025
Transaction ID : A8F861CF7ED884B0FA37
 Amount of Each Receipt this Period 14.10
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 09 / 2025
Transaction ID : A2AB343E527F04D5AAAB
 Amount of Each Receipt this Period 14.10
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. HOMES, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 WORTH AVE
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 329.00

Date of Receipt 06 / 14 / 2025
Transaction ID : A85A3409534F6465E912
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	37.60
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 24 OF 167
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 14 / 2025
Transaction ID : AFE97F37D70044650AA9

Amount of Each Receipt this Period
23.50

Memo Item
CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. HOMES, MADELEINE, , ,

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

Mailing Address 401 WORTH AVE

City PALM BEACH	State FL	Zip Code 33480
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.90

Date of Receipt
06 / 18 / 2025
Transaction ID : AD54EBC66E8B349A8A74

Amount of Each Receipt this Period
32.90

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 18 / 2025
Transaction ID : AEAAD015A521449F2988

Amount of Each Receipt this Period
32.90

Memo Item
CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	32.90
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 25 OF 167
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. HOMES, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 WORTH AVE
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **385.40**

Date of Receipt **06 / 25 / 2025**
Transaction ID : A1BBA8F612888482AAC6
 Amount of Each Receipt this Period **23.50**
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) **ANNUAL**
 Aggregate Year-to-Date **119261.06**

Date of Receipt **06 / 25 / 2025**
Transaction ID : AB9EFA89CEF2245859C2
 Amount of Each Receipt this Period **23.50**
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. HOOPER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2142 ERIN AVE
 City UPLAND State CA Zip Code 91784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **235.00**

Date of Receipt **03 / 25 / 2025**
Transaction ID : A1B4CE7C9E7A44F29A36
 Amount of Each Receipt this Period **235.00**
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	258.50
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 26 OF 167
<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)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C C00694323**

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
03 / 25 / 2025

Transaction ID : A32EE8812B7794EE4BC4

Amount of Each Receipt this Period
235.00

Memo Item
CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. KLEKOSKY, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **624 SNUG HARBOR DR B3**

City BOYNTON BEACH	State FL	Zip Code 33435
------------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **273.54**

Date of Receipt
04 / 09 / 2025

Transaction ID : A7EAB0EBAAE1848E198E

Amount of Each Receipt this Period
273.54

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
--------------------------	--------------------	--------------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
04 / 09 / 2025

Transaction ID : A706BBBD74AE9B467B81F

Amount of Each Receipt this Period
273.54

Memo Item
CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	273.54
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 27 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. KLEKOSKY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 SNUG HARBOR DR B3
 City BOYNTON BEACH State FL Zip Code 33435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 603.48

Date of Receipt 04 / 15 / 2025
Transaction ID : AC27168BBE9524730A8F
 Amount of Each Receipt this Period 329.94
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 04 / 15 / 2025
Transaction ID : A743DE1E4697740CDB8A
 Amount of Each Receipt this Period 329.94
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. NEVINS, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1287 BALLANTRAE FARM DR
 City MCLEAN State VA Zip Code 22101-3027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARBINGER STRATEGIES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 27 / 2025
Transaction ID : A51F60C692C07457EBE6
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5329.94
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 28 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. PEDERSON, JEREMY, , ,
 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)
 AT&T FEDERAL AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2025
Transaction ID : A17AC5DA0EAA24C81AAI
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. PHILLIPS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2836 S. HEATHER. GARDENS. WAY. U
 City State Zip Code
 AURORA CO 80014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.54

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2025
Transaction ID : A6EF769864F5F4701B23
 Amount of Each Receipt this Period
 2.82
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City State Zip Code
 ARLINGTON VA 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2025
Transaction ID : A657FF398DE874EC988A
 Amount of Each Receipt this Period
 2.82
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	1002.82
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 29 OF 167
	<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)
HOUSE CONSERVATIVES FUND

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

Mailing Address 2836 S. HEATHER. GARDENS. WAY. U

City AURORA	State CO	Zip Code 80014
----------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.24

Date of Receipt
MM / DD / YYYY
05 / 19 / 2025

Transaction ID : AA8180F9CC76C454EB18

Amount of Each Receipt this Period
4.70

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For: 2025
 Primary General
 Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
MM / DD / YYYY
05 / 19 / 2025

Transaction ID : A4322EE6F2C4340D2888

Amount of Each Receipt this Period
4.70

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

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

Mailing Address 2836 S. HEATHER. GARDENS. WAY. U

City AURORA	State CO	Zip Code 80014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
328.06

Date of Receipt
MM / DD / YYYY
06 / 07 / 2025

Transaction ID : ABB7752B4872841CCBAC

Amount of Each Receipt this Period
2.82

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	7.52
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 30 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
MM / DD / YYYY
06 / 07 / 2025
Transaction ID : A1EF76263E8CD4983B7C

Amount of Each Receipt this Period
2.82

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. POTZERNITZ, EMERY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11340 HOBACK JCT SR

City JACKSON	State WY	Zip Code 83001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.36

Date of Receipt
MM / DD / YYYY
03 / 02 / 2025
Transaction ID : A8CB3F517CDBD4AA48BF

Amount of Each Receipt this Period
274.48

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
MM / DD / YYYY
03 / 02 / 2025
Transaction ID : A6145FCDA5C2E497B869

Amount of Each Receipt this Period
274.48

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	274.48
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 31 OF 167
<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

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)
HOUSE CONSERVATIVES FUND

A. SANDERS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6213 AMY STREET
 City AMARILLO State TX Zip Code 67846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 28 / 2025
Transaction ID : A1B8CF8FB49584A998AF
 Amount of Each Receipt this Period 235.00
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 28 / 2025
Transaction ID : A27934A40C7F242B69E8
 Amount of Each Receipt this Period 235.00
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. SCHWEEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3202 MOORE PLACE
 City MONROE State LA Zip Code 71201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 14 / 2025
Transaction ID : ABE4D5B6215A243F2874
 Amount of Each Receipt this Period 47.00
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	282.00
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 32 OF 167
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2025

Transaction ID : AF771982A6ACD46E18A0

Amount of Each Receipt this Period
47.00

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. SCHWEEN, JOHN, , ,

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

Mailing Address 3202 MOORE PLACE

City MONROE	State LA	Zip Code 71201
----------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
258.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2025

Transaction ID : AC3EF32D933164C2683E

Amount of Each Receipt this Period
23.50

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2025

Transaction ID : A99DD68B262604AE3BAC

Amount of Each Receipt this Period
23.50

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	23.50
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 33 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. SCHWEEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3202 MOORE PLACE
 City MONROE State LA Zip Code 71201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt 06 / 05 / 2025
Transaction ID : A3D9032B14EA34E7CBE1
 Amount of Each Receipt this Period 23.50
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 05 / 2025
Transaction ID : A7CF160BA6D474620818
 Amount of Each Receipt this Period 23.50
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

C. SHAYS, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14659A CANALVIEW DRIVE
 City DELRAY BEACH State FL Zip Code 33484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 218.63

Date of Receipt 06 / 03 / 2025
Transaction ID : A4D086F3EB1F44C5D8BB
 Amount of Each Receipt this Period 14.10
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	37.60
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 34 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 03 / 2025

Transaction ID : AD12430985ACD41B1AD4

Amount of Each Receipt this Period
14.10

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. SHAYS, LORRAINE, , ,

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

Mailing Address 14659A CANALVIEW DRIVE

City DELRAY BEACH	State FL	Zip Code 33484
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.63

Date of Receipt
06 / 03 / 2025

Transaction ID : A9E47CBFA33334E86A22

Amount of Each Receipt this Period
14.10

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 03 / 2025

Transaction ID : AED7BE112D8664634981

Amount of Each Receipt this Period
14.10

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	14.10
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 35 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. SHIELDS, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1135 WILMINGTON CT
 City NEWARK State OH Zip Code 43055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 30 / 2025
Transaction ID : A9C48861725804431BAD
 Amount of Each Receipt this Period 235.00
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 03 / 30 / 2025
Transaction ID : AC065B6DB49474F5EA8C
 Amount of Each Receipt this Period 235.00
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. SMITH, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 SW 36TH AVE
 City BOYNTON BEACH State FL Zip Code 33435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TROPIC FIRE PROTECTION Occupation (for Individual) PREDIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 239.70

Date of Receipt 06 / 21 / 2025
Transaction ID : A91E1E5CF57CF424894C
 Amount of Each Receipt this Period 47.94
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	282.94
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 36 OF 167
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) ▼
 ANNUAL

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2025

Transaction ID : A72F6599D077B49E0BE6

Amount of Each Receipt this Period
47.94

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. TAM, ERNEST, , ,

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

Mailing Address 2338 SANTA CATALINA ST

City PALO ALTO	State CA	Zip Code 94303
-------------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2025

Transaction ID : A6CF1FAFE707C402F858

Amount of Each Receipt this Period
94.00

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify)
 ANNUAL

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2025

Transaction ID : A6185403D23344B54941

Amount of Each Receipt this Period
94.00

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	94.00
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 37 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

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

Mailing Address **2231 48TH ST NW**

City **WASHINGTON** State **DC** Zip Code **20007-1036**

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

Name of Employer (for Individual) **LMH STRATEGIC SOLUTIONS** Occupation (for Individual) **FOUNDER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt
03 / 20 / 2025

Transaction ID : A6F33172198054E8BA5C

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address **579 NW BIRCH AVE**

City **MOUNTAIN HOME** State **ID** Zip Code **83647**

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

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.50**

Date of Receipt
04 / 12 / 2025

Transaction ID : AEF5684DECA4FC5A96

Amount of Each Receipt this Period
14.10

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219**

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

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

Receipt For: **2025**
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼ **119261.06**

Date of Receipt
04 / 12 / 2025

Transaction ID : A9CEAA3732FD34B61AFF

Amount of Each Receipt this Period
14.10

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional)..... **2514.10**

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 38 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.10

Date of Receipt 04 / 13 / 2025
Transaction ID : A2ABD1A4DA553479F84F
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 04 / 13 / 2025
Transaction ID : A6FD5893DC83F40A082B
 Amount of Each Receipt this Period 23.50
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 249.10

Date of Receipt 04 / 13 / 2025
Transaction ID : A7AECFF6D3C50498D877
 Amount of Each Receipt this Period 14.10
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	37.60
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 39 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt **04 / 13 / 2025**

Transaction ID : A83907A6DA6404C64B97

Amount of Each Receipt this Period **14.10**

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. VAGT, ARTHUR, , ,

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

Mailing Address 579 NW BIRCH AVE

City MOUNTAIN HOME State ID Zip Code 83647

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date **263.20**

Date of Receipt **04 / 15 / 2025**

Transaction ID : A09E780A3E6AA4F329E7

Amount of Each Receipt this Period **14.10**

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt **04 / 15 / 2025**

Transaction ID : A4ECCAC8E1DDE468F94F

Amount of Each Receipt this Period **14.10**

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional)..... **14.10**

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 40 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.30

Date of Receipt 04 / 16 / 2025
Transaction ID : A9A279753797A4569958
 Amount of Each Receipt this Period 14.10
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 04 / 16 / 2025
Transaction ID : A76F568C5DDAB41F8A12
 Amount of Each Receipt this Period 14.10
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 291.40

Date of Receipt 04 / 17 / 2025
Transaction ID : A7ECB31AB7DA144148A9
 Amount of Each Receipt this Period 14.10
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	28.20
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 41 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) ▼
 ANNUAL

Aggregate Year-to-Date ▼
119261.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		17		2025

Transaction ID : A3AB02F8652EB4BFDB60

Amount of Each Receipt this Period
14.10

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. VAGT, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 579 NW BIRCH AVE

City MOUNTAIN HOME	State ID	Zip Code 83647
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
314.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2025

Transaction ID : AD6FA313DDB5D4AA5BC1

Amount of Each Receipt this Period
23.50

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify)
 ANNUAL

Aggregate Year-to-Date ▼
119261.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2025

Transaction ID : A5A313E5B5F134BA59A4

Amount of Each Receipt this Period
23.50

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	23.50
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 42 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.40

Date of Receipt 04 / 27 / 2025
Transaction ID : A8F556FE328A24B5E84F
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 04 / 27 / 2025
Transaction ID : AE64003EF02104898AE2
 Amount of Each Receipt this Period 23.50
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.90

Date of Receipt 05 / 18 / 2025
Transaction ID : A21A2C41C36434C3E9D5
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	47.00
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 43 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2025

Transaction ID : A54BF54625DFE4754B7E

Amount of Each Receipt this Period
 23.50

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. VAGT, ARTHUR, , ,

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

Mailing Address 579 NW BIRCH AVE

City MOUNTAIN HOME State ID Zip Code 83647

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

Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date **376.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2025

Transaction ID : A2A53F7B3BD684A8497C

Amount of Each Receipt this Period
 14.10

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2025

Transaction ID : A96464081E2A548F0B9B

Amount of Each Receipt this Period
 14.10

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional)..... **14.10**

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 44 OF 167
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 399.50

Date of Receipt 06 / 04 / 2025
Transaction ID : A74903579BC1C4FD1B5E
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 04 / 2025
Transaction ID : A17DFE9456C8C4427A47
 Amount of Each Receipt this Period 23.50
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 423.00

Date of Receipt 06 / 06 / 2025
Transaction ID : A46371E5B3A484CC8B49
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	47.00
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:	PAGE 45 OF 167
	(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)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 06 / 2025
Transaction ID : A75BDD0728CDA4B4C933

Amount of Each Receipt this Period
23.50

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. VAGT, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 579 NW BIRCH AVE

City MOUNTAIN HOME	State ID	Zip Code 83647
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
446.50

Date of Receipt
06 / 07 / 2025
Transaction ID : A0B4FC64985534C1F8A7

Amount of Each Receipt this Period
23.50

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 07 / 2025
Transaction ID : A80660176C27D4968A42

Amount of Each Receipt this Period
23.50

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	23.50
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 46 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.25

Date of Receipt 06 / 26 / 2025
Transaction ID : A8FC96310C44E417B809
 Amount of Each Receipt this Period 23.75
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 26 / 2025
Transaction ID : AB307BAA448544C019F6
 Amount of Each Receipt this Period 23.75
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 517.25

Date of Receipt 06 / 28 / 2025
Transaction ID : AD3427D88928E4A7483F
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	47.25
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 47 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 28 / 2025
Transaction ID : A71911C92829D44F7BB2

Amount of Each Receipt this Period
23.50

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. VAGT, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 579 NW BIRCH AVE

City MOUNTAIN HOME	State ID	Zip Code 83647
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
517.25

Date of Receipt
06 / 28 / 2025
Transaction ID : AE8DB3E2D9E344BA9B11

Amount of Each Receipt this Period
23.50

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 28 / 2025
Transaction ID : AF52BC00CB3D34519B84

Amount of Each Receipt this Period
23.50

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	23.50
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 48 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. VAGT, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 NW BIRCH AVE
 City MOUNTAIN HOME State ID Zip Code 83647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 540.75

Date of Receipt 06 / 29 / 2025
Transaction ID : A5B37672D18BE4F26809
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ANNUAL Aggregate Year-to-Date 119261.06

Date of Receipt 06 / 29 / 2025
Transaction ID : A58180B972B75465CAF8
 Amount of Each Receipt this Period 23.50
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. VETTER, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 SUPERIOR BLVD
 City WAYZATA State MN Zip Code 55391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 220.33

Date of Receipt 06 / 30 / 2025
Transaction ID : AACB557EC1F4E456A8A9
 Amount of Each Receipt this Period 24.75
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	48.25
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 49 OF 167
<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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219**

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt **06 / 30 / 2025**

Transaction ID : AC8B3661EC1F44CC2B0F

Amount of Each Receipt this Period **24.75**

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. VINA, MORGAN, , ,

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)
INVARIANT PRINCIPAL

Receipt For:
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 27 / 2025**

Transaction ID : AD282F7AF5DAF43BD878

Amount of Each Receipt this Period **500.00**

Memo Item

C. WILLIAMS, BETTY, , ,

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

Mailing Address **311 HARPER LOOP**

City **GRANTS PASS** State **OR** Zip Code **97527**

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **224.13**

Date of Receipt **05 / 20 / 2025**

Transaction ID : A74E6041D335347E0AA9

Amount of Each Receipt this Period **26.03**

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	526.03
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 50 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
--------------------------	--------------------	--------------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
 / /
05 / 20 / 2025

Transaction ID : A39011B1D3E054D9485C

Amount of Each Receipt this Period
 26.03

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. WILLIAMS, BETTY, , ,

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

Mailing Address **311 HARPER LOOP**

City GRANTS PASS	State OR	Zip Code 97527
----------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **224.13**

Date of Receipt
 / /
05 / 20 / 2025

Transaction ID : AEB316400930F4078952

Amount of Each Receipt this Period
 24.75

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address **PO BOX 9891**

City ARLINGTON	State VA	Zip Code 22219
--------------------------	--------------------	--------------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
 / /
05 / 20 / 2025

Transaction ID : A0480968D3E124710A9F

Amount of Each Receipt this Period
 24.75

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	24.75
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 51 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WILLIAMS, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 HARPER LOOP
 City GRANTS PASS State OR Zip Code 97527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.13

Date of Receipt 05 / 20 / 2025
Transaction ID : A67EB905CFCBF4A74B79
 Amount of Each Receipt this Period 24.75
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 05 / 20 / 2025
Transaction ID : A4A3E3217788E4F08B76
 Amount of Each Receipt this Period 24.75
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. WILLIAMS, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 HARPER LOOP
 City GRANTS PASS State OR Zip Code 97527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 224.13

Date of Receipt 05 / 20 / 2025
Transaction ID : A196930CD5099431D97D
 Amount of Each Receipt this Period 3.80
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶	28.55
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 52 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219**

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt **05 / 20 / 2025**

Transaction ID : A367B050CFD9A4E72ADD

Amount of Each Receipt this Period **3.80**

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. WILLIAMS, BETTY, , ,

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

Mailing Address **311 HARPER LOOP**

City **GRANTS PASS** State **OR** Zip Code **97527**

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date **248.64**

Date of Receipt **05 / 25 / 2025**

Transaction ID : AB33F72296C744929BB8

Amount of Each Receipt this Period **10.41**

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address **PO BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219**

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt **05 / 25 / 2025**

Transaction ID : A99C3822671FD4D129BC

Amount of Each Receipt this Period **10.41**

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional)..... **10.41**

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 53 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WILLIAMS, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 HARPER LOOP
 City GRANTS PASS State OR Zip Code 97527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 248.64

Date of Receipt 05 / 25 / 2025
Transaction ID : A1C1B3CB36DE744D2A66
 Amount of Each Receipt this Period 14.10
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 05 / 25 / 2025
Transaction ID : A476C1D222B0E488DAF3
 Amount of Each Receipt this Period 14.10
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. WILLIAMS, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 HARPER LOOP
 City GRANTS PASS State OR Zip Code 97527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.46

Date of Receipt 05 / 30 / 2025
Transaction ID : AF56310135E0D40359ED
 Amount of Each Receipt this Period 14.10
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	28.20
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 54 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2025

Transaction ID : A6FBD9204F6D447309A3

Amount of Each Receipt this Period
 14.10

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

B. WILLIAMS, BETTY, , ,

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

Mailing Address 311 HARPER LOOP

City GRANTS PASS	State OR	Zip Code 97527
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **301.46**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2025

Transaction ID : A80F3B1DF885F46D0A33

Amount of Each Receipt this Period
 14.10

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date **119261.06**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2025

Transaction ID : ABC773A1395214AA5AFB

Amount of Each Receipt this Period
 14.10

Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	14.10
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 55 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WILLIAMS, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 HARPER LOOP
 City GRANTS PASS State OR Zip Code 97527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.46

Date of Receipt 05 / 30 / 2025
Transaction ID : ACE25B83BFCD247759DB
 Amount of Each Receipt this Period 3.80
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 05 / 30 / 2025
Transaction ID : A8752FA95041E459B9AA
 Amount of Each Receipt this Period 3.80
 Memo Item
 CONDUIT MEMO TOTAL
 EARMARK NON-DIRECTED

C. WILLIAMS, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 HARPER LOOP
 City GRANTS PASS State OR Zip Code 97527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 301.46

Date of Receipt 05 / 30 / 2025
Transaction ID : A0E7734E763404436837
 Amount of Each Receipt this Period 20.82
 Memo Item
 EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	24.62
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 56 OF 167
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: PAGE 56 OF 167
(check only one)
[X] 11a [] 11b [] 11c [] 12
[] 13 [] 14 [] 15 [] 16 [] 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891
City ARLINGTON State VA Zip Code 22219
FEC ID number of contributing federal political committee. C C00694323
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: 2025
[] Primary [] General
[X] Other (specify) ANNUAL
Aggregate Year-to-Date 119261.06

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2025
Transaction ID : A020CAA5A738E4338939
Amount of Each Receipt this Period
20.82
[X] Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. WILLIAMS, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 311 HARPER LOOP
City GRANTS PASS State OR Zip Code 97527
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED
Receipt For:
[] Primary [] General
[] Other (specify)
Aggregate Year-to-Date 334.36

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 31 / 2025
Transaction ID : A82F83F9ABF4D4ACEAA2
Amount of Each Receipt this Period
32.90
[] Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891
City ARLINGTON State VA Zip Code 22219
FEC ID number of contributing federal political committee. C C00694323
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: 2025
[] Primary [] General
[X] Other (specify) ANNUAL
Aggregate Year-to-Date 119261.06

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 31 / 2025
Transaction ID : AFE028F1C5D614C62BFD
Amount of Each Receipt this Period
32.90
[X] Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional)..... 32.90
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 57 OF 167
	<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)
HOUSE CONSERVATIVES FUND

A. WILLIAMS, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 HARPER LOOP
 City GRANTS PASS State OR Zip Code 97527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.86

Date of Receipt 06 / 07 / 2025
Transaction ID : A1C8B89C100834B098BF
 Amount of Each Receipt this Period 23.50
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2025 Primary General Other (specify) ▼ ANNUAL
 Aggregate Year-to-Date ▼ 119261.06

Date of Receipt 06 / 07 / 2025
Transaction ID : A64A70EA043AB43D98EE
 Amount of Each Receipt this Period 23.50
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. WILLIAMS, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 HARPER LOOP
 City GRANTS PASS State OR Zip Code 97527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 371.96

Date of Receipt 06 / 17 / 2025
Transaction ID : AB2D1CCBED0F3419C849
 Amount of Each Receipt this Period 14.10
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	37.60
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 58 OF 167
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 17 / 2025
Transaction ID : AFafa1D7D21AE4AA1A1C

Amount of Each Receipt this Period
14.10

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. WILLIAMS, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 311 HARPER LOOP

City GRANTS PASS	State OR	Zip Code 97527
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
386.06

Date of Receipt
06 / 25 / 2025
Transaction ID : A77FA68D943AE4BDF81E

Amount of Each Receipt this Period
14.10

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

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

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

Receipt For: 2025
 Primary General
 Other (specify) **ANNUAL**

Aggregate Year-to-Date ▼
119261.06

Date of Receipt
06 / 25 / 2025
Transaction ID : A4D4E7FC835804FD3AEB

Amount of Each Receipt this Period
14.10

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

SUBTOTAL of Receipts This Page (optional).....	14.10
TOTAL This Period (last page this line number only).....	35480.79

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 59 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035451

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A7405793349434A0CAAD

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ALTRIA GROUP, INC. PAC (ALTRIAPAC)

Mailing Address 101 CONSTITUTION AVE NW
SUITE 400W

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00089136

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2025

Transaction ID : A81403CD26FFF4AD9BE4

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION PAC (SKINPAC)

Mailing Address 1201 PENNSYLVANIA AVE NW
STE 540

City WASHINGTON	State DC	Zip Code 20004-2463
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00359539

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A57AB6BDCBAA94AA8B3:

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 60 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 10275 W HIGGINS RD
STE 500

City ROSEMONT State IL Zip Code 60018-3887

FEC ID number of contributing federal political committee. **C** C00173153

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2025

Transaction ID : A864C799B0EF64DFCA4E

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVE NW
STE 600

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C** C00004275

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2025

Transaction ID : A14A1BEE7868E406DB7F

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 TENTH STREET, NW
TWO CITYCENTER, SUITE 400

City WASHINGTON State DC Zip Code 20001-5188

FEC ID number of contributing federal political committee. **C** C00106146

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2025

Transaction ID : A5C5569A21C96476E98B

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 61 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN HOTEL AND LODGING ASSOCIATION POLITICAL ACTION COMMITTEE ('HOTELPAC')

Mailing Address 1250 EYE STREET, NW #1100

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00001198

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2025

Transaction ID : AB961F48375A942A794C

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC

Mailing Address 251 H ST NW

City WASHINGTON	State DC	Zip Code 20001-2604
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00797670

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2025

Transaction ID : AE09C2B0D6A2F46198C6

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVE, NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000422

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2025

Transaction ID : AFE65C7642CD248D29CD

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 62 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. AMERICA'S CREDIT UNIONS PAC OF CREDIT UNION NATIONAL ASSOCIATION, INC.

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

Mailing Address 99 M ST SE
STE 300

City WASHINGTON State DC Zip Code 20003-3957

FEC ID number of contributing federal political committee. **C** C00007880

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 31 / 2025
Transaction ID : A631791D7CB6B468588F

Amount of Each Receipt this Period
5000.00

Memo Item

B. ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)

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

Mailing Address 5845 RICHMOND HWY
STE 820

City ALEXANDRIA State VA Zip Code 22303-1872

FEC ID number of contributing federal political committee. **C** C00336743

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 19 / 2025
Transaction ID : AF6918CF27CC24631AC6

Amount of Each Receipt this Period
5000.00

Memo Item

C. ASTELLAS US LLC PAC (ASTELLAS PAC)

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

Mailing Address 1 ASTELLAS WAY

City NORTHBROOK State IL Zip Code 60062-6111

FEC ID number of contributing federal political committee. **C** C00444885

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 31 / 2025
Transaction ID : A27C619AE71EE4BB0B39

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 63 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. AT&T INC. FEDERAL PAC (AT&T FEDERAL PAC)

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

Mailing Address 208 S. AKARD STREET
SUITE 3521

City DALLAS State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2025

Transaction ID : AE1EA9CFE4717417583B

Amount of Each Receipt this Period
1000.00

Memo Item

B. AT&T INC. FEDERAL PAC (AT&T FEDERAL PAC)

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

Mailing Address 208 S. AKARD STREET
SUITE 3521

City DALLAS State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2025

Transaction ID : A73B5180F4F064771B1A

Amount of Each Receipt this Period
1000.00

Memo Item

C. BGR PAC

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

Mailing Address 601 THIRTEENTH STREET, NW
ELEVENTH FLOOR SOUTH

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C** C00359588

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2025

Transaction ID : AFFA1E97136394383B3E

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 64 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE)

Mailing Address 410 SEVENTEENTH STREET
SUITE 2200

City DENVER State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C** C00390583

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2025

Transaction ID : AC0DCA61FBEC54EC69E6

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILD PAC)

Mailing Address 1201 15TH STREET, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2025

Transaction ID : AF336C8B41F93474E8B4

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2025

Transaction ID : A5F71550FCFD742788E8

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 65 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F STREET NW SUITE 300

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00477653

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2025

Transaction ID : A65B370B85A4B45FB9D8

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DELL TECHNOLOGIES, INC. PAC

Mailing Address 440 FIRST ST, NW
SUITE 820

City WASHINGTON	State DC	Zip Code 20001-3033
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00369751

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A2CF19EB492404B9D957

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EDWARD JONES PAC

Mailing Address 300 NEW JERSEY AVE NW
STE 900

City WASHINGTON	State DC	Zip Code 20001-2271
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00410407

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A5D83FAF1691E44F2AD9

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 66 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)

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

Mailing Address 1001 PENNSYLVANIA AVE NW
STE 710

City WASHINGTON State DC Zip Code 20004-2513

FEC ID number of contributing federal political committee. **C** C00197228

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 04 / 2025

Transaction ID : AC8BE16D702FB416BAF5

Amount of Each Receipt this Period
5000.00

Memo Item

B. ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

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

Mailing Address LILLY CORPORATE CENTER

City INDIANAPOLIS State IN Zip Code 46285

FEC ID number of contributing federal political committee. **C** C00082792

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 31 / 2025

Transaction ID : AE77F09ACB92E4133A11

Amount of Each Receipt this Period
5000.00

Memo Item

C. ENERGY CORPORATION POLITICAL ACTION COMMITTEE (ENPAC)

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

Mailing Address 425 WEST CAPITOL AVENUE, STE24B

City LITTLE ROCK State AR Zip Code 72201

FEC ID number of contributing federal political committee. **C** C00363879

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 14 / 2025

Transaction ID : A91663CA2D9E5438798B

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 67 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. EYE OF THE TIGER POLITICAL ACTION COMMITTEE; THE

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

Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152
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FEC ID number of contributing federal political committee. **C** C00467431

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A7D09BA3F76DE4FB087A

Amount of Each Receipt this Period
5000.00

Memo Item

B. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

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

Mailing Address 11011 SUNSET HILLS ROAD

City RESTON	State VA	Zip Code 20190
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00078451

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2025

Transaction ID : A7D8EFAFE02D74997838

Amount of Each Receipt this Period
5000.00

Memo Item

C. GILEAD SCIENCES INC HEALTHCARE POLICY PAC

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

Mailing Address 333 LAKESIDE DR

City FOSTER CITY	State CA	Zip Code 94404-1147
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00396895

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : AB2942DD787AD429EB18

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 68 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. H&R BLOCK INC. PAC (BLOCKPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **ONE H&R BLOCK WAY**
 City **KANSAS CITY** State **MO** Zip Code **64105-1905**
 FEC ID number of contributing federal political committee. **C C00188177**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 19 / 2025
Transaction ID : AF99D57DC9100441283C
 Amount of Each Receipt this Period
5000.00
 Memo Item

B. HEALTH CARE SERVICE CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **300 E. RANDOLPH LEGAL DEPT.**
 City **CHICAGO** State **IL** Zip Code **60601**
 FEC ID number of contributing federal political committee. **C C00199711**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 19 / 2025
Transaction ID : ABB32D5CBD59245E6950
 Amount of Each Receipt this Period
5000.00
 Memo Item

C. HUMANA INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **975 F ST NW STE 520**
 City **WASHINGTON** State **DC** Zip Code **20004-1466**
 FEC ID number of contributing federal political committee. **C C00271007**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 25 / 2025
Transaction ID : A2DFBC266414741068F5
 Amount of Each Receipt this Period
5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 69 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. IHEARTMEDIA INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20880 STONE OAK PARKWAY
 City SAN ANTONIO State TX Zip Code 78258
 FEC ID number of contributing federal political committee. **C** C00279216
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2025
Transaction ID : A921E90A9AD834D69A52
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC (INSURPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 1ST ST SE STE 300
 City WASHINGTON State DC Zip Code 20003-1804
 FEC ID number of contributing federal political committee. **C** C00022343
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2025
Transaction ID : AD233FB9EA63C406BBC7
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. JPMORGAN CHASE & CO. FEDERAL PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 15TH ST NW FL 9
 City WASHINGTON State DC Zip Code 20005-2221
 FEC ID number of contributing federal political committee. **C** C00104299
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 14 / 2025
Transaction ID : A7BE75BAA438C4504AAE
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 70 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. KPMG PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 18254

City WASHINGTON	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00280222

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A35744BC69F834A238C2

Amount of Each Receipt this Period
5000.00

Memo Item

B. MARATHON PETROLEUM CORPORATION EMPLOYEES PAC (MPAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 539 S MAIN ST

City FINDLAY	State OH	Zip Code 45840-3229
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00496307

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	09	/	2025

Transaction ID : AF3B8219E798044D6851

Amount of Each Receipt this Period
5000.00

Memo Item

C. MERCK & CO., INC., EMPLOYEES PAC (MERCK PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 PENNSYLVANIA AVE NW
NORTH BUILDING, SUITE 1200

City WASHINGTON	State DC	Zip Code 20004-2601
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FEC ID number of contributing federal political committee. **C** C00097485

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A9AE2512DFA0848528D7

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 71 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MOLINA HEALTHCARE, INC. PAC

Mailing Address 200 OCEANGATE
STE 100

City LONG BEACH State CA Zip Code 90802-4317

FEC ID number of contributing federal political committee. **C** C00430256

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2025

Transaction ID : AC36BB85A04D24872A5C

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 3601 VINCENNES ROAD
PO BOX 68700

City INDIANAPOLIS State IN Zip Code 46268

FEC ID number of contributing federal political committee. **C** C00170258

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2025

Transaction ID : AA0F011EB395E4E9E956

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2025

Transaction ID : A951CF2CA76734842BB7

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 72 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)
HOUSE CONSERVATIVES FUND

A. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 KING STREET
 SUITE 600
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C** C00144766
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2025
Transaction ID : A3489E8E660894282954
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 MASSACHUSETTS AVENUE, NW #100
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00010082
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2025
Transaction ID : AB3D96EB1ECA649EE84E
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. NATIONAL CATTLEMEN'S BEEF ASSOCIATION PAC (NCBA-PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1275 PENNSYLVANIA AVE NW
 STE 801
 City WASHINGTON State DC Zip Code 20004-2434
 FEC ID number of contributing federal political committee. **C** C00028787
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2025
Transaction ID : A60CC0301D9984BE382F
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 73 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City CORDOVA	State TN	Zip Code 38088
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023028

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : AD14A7A95DA414110BC9

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL RESTAURANT ASSOCIATION PAC

Mailing Address 1200 17TH STREET NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003764

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A751CEB4D0A454C7BB35

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NOVO NORDISK INC. PAC (NOVO NORDISK PAC)

Mailing Address 920 MASSACHUSETTS AVE, NW
SUITE 500

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00424838

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	09	/	2025

Transaction ID : ADE3F8EAE50B24C61825

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 74 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. OVERHAUL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 824 S MILLEDGE AVE
STE 101
City ATHENS State GA Zip Code 30606
FEC ID number of contributing federal political committee. **C** C00802595
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 25 / 2025
Transaction ID : ACC2F66631AAB401BA5A
Amount of Each Receipt this Period 5000.00
 Memo Item

B. PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1301 K STREET, NW
SUITE 800W
City WASHINGTON State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00107235
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 19 / 2025
Transaction ID : A321499B66A934DC785B
Amount of Each Receipt this Period 5000.00
 Memo Item

C. REPUBLICANS UNITED TO DEFEND YOU PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 26141
City ALEXANDRIA State VA Zip Code 22313-6141
FEC ID number of contributing federal political committee. **C** C00823351
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 07 / 2025
Transaction ID : A5100C8C4474646848DE
Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00
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 75 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SEMPRA ENERGY EMPLOYEES PAC- FEDERAL

Mailing Address 488 8TH AVE

City SAN DIEGO	State CA	Zip Code 92101-7123
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00008748

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2025

Transaction ID : A6DEBDC1C211C4997A1E

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SLM CORPORATION PAC (SALLIE MAE PAC)

Mailing Address 300 CONTINENTAL DRIVE

City NEWARK	State DE	Zip Code 19713
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00580076

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2025

Transaction ID : AE4557ED4E5A44967B99

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. THE CIGNA GROUP EMPLOYEE PAC

Mailing Address 701 PENNSYLVANIA AVE NW
STE 720

City WASHINGTON	State DC	Zip Code 20004-2626
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FEC ID number of contributing federal political committee. **C** C00085316

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : AF71A415F1B864DBA86A

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 76 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00284885

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 31 / 2025
Transaction ID : A135B909921F46E090E

Amount of Each Receipt this Period
5000.00

Memo Item

B. THE KRAFT HEINZ COMPANY PAC (KRAFTHEINZPAC)

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

Mailing Address 401 9TH ST NW
STE 810

City WASHINGTON State DC Zip Code 20004-2189

FEC ID number of contributing federal political committee. **C** C00077701

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 19 / 2025
Transaction ID : A6C3C3823705F427CB79

Amount of Each Receipt this Period
5000.00

Memo Item

C. T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)

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

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00361758

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 19 / 2025
Transaction ID : A4F133C22C7724419993

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 77 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. UNITED PARCEL SERVICE INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 GLENLAKE PARKWAY NE
 City ATLANTA State GA Zip Code 30328
 FEC ID number of contributing federal political committee. **C** C00064766
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2025
Transaction ID : AE1FA7E0AE77E457CBAC
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. US ENERGY PAC (THE PAC OF AMERICAN EXPLORATION & PRODUCTION COUNCIL, INC.)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 999 E ST NW STE 200
 City WASHINGTON State DC Zip Code 20004-2041
 FEC ID number of contributing federal political committee. **C** C00755454
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 04 / 2025
Transaction ID : AD871A4CF7B3E4DCCAD0
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 VALERO WAY
 City SAN ANTONIO State TX Zip Code 78249-1616
 FEC ID number of contributing federal political committee. **C** C00109546
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 14 / 2025
Transaction ID : A80C52A2D134D472C816
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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: PAGE 78 OF 167
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8TH ST

City BENTONVILLE State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 04 / 2025
Transaction ID : AA9EBD4D6DDEC4F3E9C

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	282000.00

**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 79 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AMERICAN BATTLEGROUND FUND

Mailing Address **PO BOX 30844**

City BETHESDA	State MD	Zip Code 20824-0844
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FEC ID number of contributing federal political committee. **C C00857649**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14002.77

Date of Receipt
06 / 23 / 2025

Transaction ID : A2AE2EB13725F4391825

Amount of Each Receipt this Period
14002.77

Memo Item
TRANSFER OF NET PROCEEDS

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

Mailing Address **6 DESTA DR
STE 5500**

City MIDLAND	State TX	Zip Code 79705-5580
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) _____ Occupation (for Individual) _____
INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
04 / 30 / 2025

Transaction ID : A02B52D2C61A949CF989

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address **6 DESTA DR
STE 5500**

City MIDLAND	State TX	Zip Code 79705-5580
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) _____ Occupation (for Individual) _____
MABEE RANCH **MANAGER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
04 / 30 / 2025

Transaction ID : ABCD2A65647C04B97808

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	14002.77
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 80 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ARRINGTON, DAVID, H., ,

Mailing Address 500 W WALL ST
STE 300

City MIDLAND State TX Zip Code 79701-5093

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

Name of Employer (for Individual) ARRINGTON OIL & GAS Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
04 / 07 / 2025

Transaction ID : **A87F29EAC192E449D8C6**

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PFLUGER VICTORY COMMITTEE

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C** C00753913

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30792.11

Date of Receipt
MM / DD / YYYY
03 / 31 / 2025

Transaction ID : **AFD18BEFE88F54076AF0**

Amount of Each Receipt this Period
9136.70

Memo Item
TRANSFER OF NET PROCEEDS

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

Mailing Address 3724 HULEN ST

City FORT WORTH State TX Zip Code 76107-6816

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

Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2025

Transaction ID : **A4D8E4006F25C4289A67**

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9136.70
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 81 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. SELLERS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3724 HULEN ST
City FORT WORTH State TX Zip Code 76107-6816
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) DOUBLE EAGLE Occupation (for Individual) CO-CEO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 03 / 11 / 2025
Transaction ID : **ABE064F3A7FEF46F0B5C**
Amount of Each Receipt this Period 5000.00
 Memo Item

B. PFLUGER VICTORY COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 30844
City BETHESDA State MD Zip Code 20824-0844
FEC ID number of contributing federal political committee. **C** C00753913
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 39310.58

Date of Receipt 06 / 30 / 2025
Transaction ID : **AAE834B3C5A3E4E02BED**
Amount of Each Receipt this Period 8518.47
 Memo Item
TRANSFER OF NET PROCEEDS

C. ANWAR, RYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 3072
City MIDLAND State TX Zip Code 79702-3072
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) MIDLAND ENERGY, INC. Occupation (for Individual) FOUNDER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt 05 / 12 / 2025
Transaction ID : **A4A6807061DF448978EF**
Amount of Each Receipt this Period 2500.00
 Memo Item
MEMO FOR RCA ENERGY AND REAL ESTATE PROPERTIES, LP

SUBTOTAL of Receipts This Page (optional).....	8518.47
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 82 OF 167
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
HOUSE CONSERVATIVES FUND

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

Mailing Address 5733 MAJESTIC CT

City SAN ANGELO State TX Zip Code 76904-1903

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

Name of Employer (for Individual) WESTERN SHAMROCK CORP Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 16 / 2025

Transaction ID : ACFB74BB271EC48499A3

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RCA ENERGY AND REAL ESTATE PROPERTIES, LP

Mailing Address PO BOX 3072

City MIDLAND State TX Zip Code 79702-3072

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 ▼
5000.00

Date of Receipt
05 / 12 / 2025

Transaction ID : AC13408B884814749BC5

Amount of Each Receipt this Period
5000.00

Memo Item

VERIFIED NON CORPORATE SEE MEMO ITEMS

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

Mailing Address PO BOX 3072

City MIDLAND State TX Zip Code 79702-3072

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

Name of Employer (for Individual) Occupation (for Individual)
HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
05 / 12 / 2025

Transaction ID : ADAC58251BA6D43F59CD

Amount of Each Receipt this Period
2500.00

Memo Item

MEMO FOR RCA ENERGY AND REAL ESTATE, LP

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	31657.94

**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)
HOUSE CONSERVATIVES FUND

A. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 08 / 2025

FEC Identification Number
C
Transaction ID : B733C1D4EA
Amount of Each Disbursement this Period
137.78

Memo Item

B. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2025

FEC Identification Number
C
Transaction ID : BCB76B0C46
Amount of Each Disbursement this Period
55.10

Memo Item

C. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 03 / 2025

FEC Identification Number
C
Transaction ID : BD3C3BC2FI
Amount of Each Disbursement this Period
66.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 258.88

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

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)
HOUSE CONSERVATIVES FUND

A. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 03 / 2025

FEC Identification Number
C

Transaction ID : **B583DC4AFF**

Amount of Each Disbursement this Period
25.08

Memo Item

B. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 03 / 2025

FEC Identification Number
C

Transaction ID : **BE4055825B7**

Amount of Each Disbursement this Period
14.09

Memo Item

C. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
CREDIT: GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2025

FEC Identification Number
C

Transaction ID : **B685929853f**

Amount of Each Disbursement this Period
- 25.08

Memo Item

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

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

14.09

**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)
HOUSE CONSERVATIVES FUND

A. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 07 / 2025

FEC Identification Number: C

Transaction ID : B0F7DD99A1

Amount of Each Disbursement this Period: 25.08

Memo Item

B. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 29 / 2025

FEC Identification Number: C

Transaction ID : B40CC7BFEA

Amount of Each Disbursement this Period: 40.15

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 450 LAUREL ST.

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement
E-MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 24 / 2025

FEC Identification Number: C

Transaction ID : BC39176516I

Amount of Each Disbursement this Period: 100.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 165.53

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

**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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 450 LAUREL ST.

City **BATON ROUGE** State **LA** Zip Code **70801**

Purpose of Disbursement **E-MERCHANT FEES** Category/Type **001**

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 28 / 2025

FEC Identification Number
C
Transaction ID : B8870DE7DC
Amount of Each Disbursement this Period
301.20

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 450 LAUREL ST.

City **BATON ROUGE** State **LA** Zip Code **70801**

Purpose of Disbursement **E-MERCHANT FEES** Category/Type **001**

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
04 / 03 / 2025

FEC Identification Number
C
Transaction ID : BF2FEBCC3
Amount of Each Disbursement this Period
390.90

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 450 LAUREL ST.

City **BATON ROUGE** State **LA** Zip Code **70801**

Purpose of Disbursement **E-MERCHANT FEES** Category/Type **001**

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
05 / 30 / 2025

FEC Identification Number
C
Transaction ID : B3F91F760C
Amount of Each Disbursement this Period
40.30

Memo Item

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

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

732.40

**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)
HOUSE CONSERVATIVES FUND

A. ARISTOTLE INTERNATIONAL

Full Name (Last, First, Middle Initial)

Mailing Address 205 PENNSYLVANIA AVE. SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement SOFTWARE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 16 / 2025

FEC Identification Number: C

Transaction ID : B5B4BF4AF6

Amount of Each Disbursement this Period: 3000.00

Memo Item

B. ARISTOTLE INTERNATIONAL

Full Name (Last, First, Middle Initial)

Mailing Address 205 PENNSYLVANIA AVE. SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement SOFTWARE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 30 / 2025

FEC Identification Number: C

Transaction ID : BDA37F9A7B

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. BULLFEATHERS

Full Name (Last, First, Middle Initial)

Mailing Address 410 1ST STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEAL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2025

FEC Identification Number: C

Transaction ID : B56186CA90

Amount of Each Disbursement this Period: 374.72

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4874.72

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

**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)
HOUSE CONSERVATIVES FUND

A. CAPITAL GRILLE

Full Name (Last, First, Middle Initial)

Mailing Address 601 PENNSYLVANIA AVENUE NW

City WASHINGTON State DC Zip Code 20004-2601

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 08 / 2025

FEC Identification Number: C

Transaction ID : B21ABEE3EI

Amount of Each Disbursement this Period: 1168.75

Memo Item

B. CAPITAL GRILLE

Full Name (Last, First, Middle Initial)

Mailing Address 601 PENNSYLVANIA AVENUE NW

City WASHINGTON State DC Zip Code 20004-2601

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 20 / 2025

FEC Identification Number: C

Transaction ID : B4F232108EA

Amount of Each Disbursement this Period: 1455.15

Memo Item

C. CAPITAL GRILLE

Full Name (Last, First, Middle Initial)

Mailing Address 601 PENNSYLVANIA AVENUE NW

City WASHINGTON State DC Zip Code 20004-2601

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 24 / 2025

FEC Identification Number: C

Transaction ID : B3139676F4I

Amount of Each Disbursement this Period: 3326.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5950.20

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

**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)
HOUSE CONSERVATIVES FUND

A. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CATERING 003 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 12 / 2025

FEC Identification Number: C
Transaction ID : BC8FE9A9E3
Amount of Each Disbursement this Period: 2921.00

Memo Item

B. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FACILITY RENTAL 007 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 05 / 12 / 2025

FEC Identification Number: C
Transaction ID : B9DFC67E5F
Amount of Each Disbursement this Period: 1478.40

Memo Item

C. CAVA

Full Name (Last, First, Middle Initial)

Mailing Address 523 H ST NE

City WASHINGTON State DC Zip Code 20002-4337

Purpose of Disbursement MEAL EXPENSE 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 05 / 02 / 2025

FEC Identification Number: C
Transaction ID : B7C411136D
Amount of Each Disbursement this Period: 229.25

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4628.65
TOTAL This Period (last page this line number only).....▶	

**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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. CFS COMPLIANCE

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 02 / 2025

FEC Identification Number
C
Transaction ID : B893E2AEB4
Amount of Each Disbursement this Period
3500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CFS COMPLIANCE

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 16 / 2025

FEC Identification Number
C
Transaction ID : B8F90B24BA
Amount of Each Disbursement this Period
1750.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CFS COMPLIANCE

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
06 / 10 / 2025

FEC Identification Number
C
Transaction ID : B635728B4C
Amount of Each Disbursement this Period
1750.00

Memo Item

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

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

7000.00

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)
HOUSE CONSERVATIVES FUND

A. CHAIN BRIDGE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 1445A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101-5709

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2025

FEC Identification Number: C

Transaction ID : B53C4F6C80

Amount of Each Disbursement this Period: 25.00

Memo Item

B. CHAIN BRIDGE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 1445A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101-5709

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 24 / 2025

FEC Identification Number: C

Transaction ID : B87656D843E

Amount of Each Disbursement this Period: 25.00

Memo Item

C. CHOPT

Full Name (Last, First, Middle Initial)

Mailing Address 735 N LYNN ST

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2025

FEC Identification Number: C

Transaction ID : BE40C42EBE

Amount of Each Disbursement this Period: 517.40

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	567.40
TOTAL This Period (last page this line number only).....▶	

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)
HOUSE CONSERVATIVES FUND

A. AMTRAK

Full Name (Last, First, Middle Initial)

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-4285

Purpose of Disbursement TRANSPORTATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 18 / 2025

FEC Identification Number: C

Transaction ID : B728006D5C!

Amount of Each Disbursement this Period: 473.00

Memo Item

B. COSTCO

Full Name (Last, First, Middle Initial)

Mailing Address 999 LAKE DR

City ISSAQUAH State WA Zip Code 98027-8990

Purpose of Disbursement GENERAL OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2025

FEC Identification Number: C

Transaction ID : BEEF68E083!

Amount of Each Disbursement this Period: 331.67

Memo Item

C. EL BEBE

Full Name (Last, First, Middle Initial)

Mailing Address 99 M ST SE

City WASHINGTON State DC Zip Code 20003-3799

Purpose of Disbursement MEAL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 20 / 2025

FEC Identification Number: C

Transaction ID : B9458F613C!

Amount of Each Disbursement this Period: 40.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 372.30

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

**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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. EL BEBE

Mailing Address 99 M ST SE

City
WASHINGTON

State
DC

Zip Code
20003-3799

Purpose of Disbursement

CATERING

003

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
0	5		2	0		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : B781C6F216

Amount of Each Disbursement this Period

[REDACTED] 311.87

Memo Item

Full Name (Last, First, Middle Initial)

B. HARRIS TEETER

Mailing Address 701 CRESTDALE RD

City
MATTHEWS

State
NC

Zip Code
28105-1700

Purpose of Disbursement

FOOD AND BEVERAGE

001

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
0	5		2	2		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : B7DAC779A5

Amount of Each Disbursement this Period

[REDACTED] 140.15

Memo Item

Full Name (Last, First, Middle Initial)

C. HOOKS SOLUTIONS

Mailing Address 403 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-1827

Purpose of Disbursement

FUNDRAISING CONSULTING

003

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
0	3		2	0		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : BA88828028

Amount of Each Disbursement this Period

[REDACTED] 10909.44

Memo Item

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

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

[REDACTED] 11361.46

[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)
HOUSE CONSERVATIVES FUND

A. HOOKS SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 403 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1827

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2025

FEC Identification Number: C

Transaction ID : B694D9648F

Amount of Each Disbursement this Period: 24193.92

Memo Item

B. HUCKABY DAVIS LISKER INC.

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. WASHINGTON ST., STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 24 / 2025

FEC Identification Number: C

Transaction ID : B8C9A7615C

Amount of Each Disbursement this Period: 4513.96

Memo Item

C. IN LIVE DESIGN

Full Name (Last, First, Middle Initial)

Mailing Address 3301 N UNIVERSITY DR SUITE 100

City CORAL SPRINGS State FL Zip Code 33065-4149

Purpose of Disbursement EVENT SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 30 / 2025

FEC Identification Number: C

Transaction ID : B8949542A3

Amount of Each Disbursement this Period: 640.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 29348.36

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

**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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. IN LIVE DESIGN

Mailing Address 3301 N UNIVERSITY DR
SUITE 100

City CORAL SPRINGS State FL Zip Code 33065-4149

Purpose of Disbursement EVENT SUPPLIES Category/Type 006

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
06 / 04 / 2025

FEC Identification Number
C
Transaction ID : B642C08818/
Amount of Each Disbursement this Period
325.14

Memo Item

Full Name (Last, First, Middle Initial)

B. LEX POLITICA

Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734-0017

Purpose of Disbursement LEGAL SERVICES Category/Type 001

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 28 / 2025

FEC Identification Number
C
Transaction ID : BBCF48CD0E
Amount of Each Disbursement this Period
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LEX POLITICA

Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734-0017

Purpose of Disbursement LEGAL SERVICES Category/Type 001

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
04 / 08 / 2025

FEC Identification Number
C
Transaction ID : B743C276AD
Amount of Each Disbursement this Period
292.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2117.64

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

**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)
HOUSE CONSERVATIVES FUND

A. LEX POLITICA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734-0017

Purpose of Disbursement LEGAL SERVICES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 09 / 2025

FEC Identification Number: C
Transaction ID : BCB0A21124
Amount of Each Disbursement this Period: 1657.50

Memo Item

B. OCEANAIRE DC

Full Name (Last, First, Middle Initial)
Mailing Address 1201 F ST NW

City WASHINGTON State DC Zip Code 20004-1217

Purpose of Disbursement CATERING
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 14 / 2025

FEC Identification Number: C
Transaction ID : BC16CDEF30
Amount of Each Disbursement this Period: 3221.03

Memo Item

C. OCEANAIRE DC

Full Name (Last, First, Middle Initial)
Mailing Address 1201 F ST NW

City WASHINGTON State DC Zip Code 20004-1217

Purpose of Disbursement CATERING
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 29 / 2025

FEC Identification Number: C
Transaction ID : B267AC9374
Amount of Each Disbursement this Period: 700.16

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5578.69

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

**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)
HOUSE CONSERVATIVES FUND

A. OCEANAIRE DC

Full Name (Last, First, Middle Initial)

Mailing Address 1201 F ST NW

City WASHINGTON State DC Zip Code 20004-1217

Purpose of Disbursement CATERING Category/Type 007

Candidate Name

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

State: District:

Date of Disbursement 06 / 03 / 2025

FEC Identification Number C

Transaction ID : **BB41B4E619**

Amount of Each Disbursement this Period 600.00

Memo Item

B. OCEANAIRE DC

Full Name (Last, First, Middle Initial)

Mailing Address 1201 F ST NW

City WASHINGTON State DC Zip Code 20004-1217

Purpose of Disbursement CATERING Category/Type 007

Candidate Name

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

State: District:

Date of Disbursement 06 / 05 / 2025

FEC Identification Number C

Transaction ID : **B5B4E2A072**

Amount of Each Disbursement this Period 4400.00

Memo Item

C. OMNI PGA FRISCO

Full Name (Last, First, Middle Initial)

Mailing Address 4341 PGA PKWY

City FRISCO State TX Zip Code 75033-0824

Purpose of Disbursement FACILITY RENTAL & CATERING Category/Type 007

Candidate Name

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

State: District:

Date of Disbursement 03 / 24 / 2025

FEC Identification Number C

Transaction ID : **B2D0D833C7**

Amount of Each Disbursement this Period 30756.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 35756.25

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

**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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. PATRIOT PROMOTIONS

Mailing Address 431 N GRAHAM
STE 286

City STEPHENVILLE State TX Zip Code 76401-8109

Purpose of Disbursement SUPPORTER GIFTS
Candidate Name
Category/Type **006**

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

Date of Disbursement
MM / DD / YYYY
03 / 13 / 2025

FEC Identification Number
C
Transaction ID : **B327CD66FF**
Amount of Each Disbursement this Period
1837.54

Memo Item

Full Name (Last, First, Middle Initial)

B. PEX

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement INADVERTENT EXPENSE
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
03 / 26 / 2025

FEC Identification Number
C
Transaction ID : **BA08EB0ED4**
Amount of Each Disbursement this Period
173.25

Memo Item

Full Name (Last, First, Middle Initial)

C. PEX

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement INADVERTENT EXPENSE
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
03 / 27 / 2025

FEC Identification Number
C
Transaction ID : **BD604AC965**
Amount of Each Disbursement this Period
5115.43

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7126.22

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

**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)

HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. PEX

Mailing Address 1375 BROADWAY
ROOM 1100

City
NEW YORK

State

Zip Code
10018-7001

Purpose of Disbursement
CREDIT: INADVERTENT EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : B5793F77BB

Amount of Each Disbursement this Period

[REDACTED] - 4079.56

Memo Item

Full Name (Last, First, Middle Initial)

B. PEX

Mailing Address 1375 BROADWAY
ROOM 1100

City
NEW YORK

State

Zip Code
10018-7001

Purpose of Disbursement
INADVERTENT EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : B6A46BFAF5

Amount of Each Disbursement this Period

[REDACTED] 122.39

Memo Item

Full Name (Last, First, Middle Initial)

C. PEX

Mailing Address 1375 BROADWAY
ROOM 1100

City
NEW YORK

State

Zip Code
10018-7001

Purpose of Disbursement
INADVERTENT EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : BB0B7B9FF1

Amount of Each Disbursement this Period

[REDACTED] 4079.56

Memo Item

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

[REDACTED] 122.39

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

[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)
HOUSE CONSERVATIVES FUND

A. PEX

Full Name (Last, First, Middle Initial)

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement
INADVERTENT EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 27 / 2025

FEC Identification Number: C

Transaction ID : B0AD8B4669

Amount of Each Disbursement this Period: 153.46

Memo Item

B. PEX

Full Name (Last, First, Middle Initial)

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement
RETURN OF INADVERTANT PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 28 / 2025

FEC Identification Number: C

Transaction ID : BBAC59F11F

Amount of Each Disbursement this Period: - 173.25

Memo Item

C. PEX

Full Name (Last, First, Middle Initial)

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement
RETURN OF INADVERTANT PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 28 / 2025

FEC Identification Number: C

Transaction ID : B895219C04

Amount of Each Disbursement this Period: - 122.39

Memo Item

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

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

- 142.18

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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. PEX

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement CREDIT: INADVERTENT EXPENSE
Candidate Name
Category/Type 001

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

Date of Disbursement
MM / DD / YYYY
03 / 28 / 2025

FEC Identification Number
C
Transaction ID : BD314D3119
Amount of Each Disbursement this Period
- 5115.43

Memo Item

Full Name (Last, First, Middle Initial)

B. PEX

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement INADVERTENT EXPENSE
Candidate Name
Category/Type 001

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

Date of Disbursement
MM / DD / YYYY
03 / 28 / 2025

FEC Identification Number
C
Transaction ID : B3111CFE30f
Amount of Each Disbursement this Period
5775.05

Memo Item

Full Name (Last, First, Middle Initial)

C. PEX

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement CREDIT: INADVERTENT EXPENSE
Candidate Name
Category/Type 001

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

Date of Disbursement
MM / DD / YYYY
03 / 28 / 2025

FEC Identification Number
C
Transaction ID : BCA0679134
Amount of Each Disbursement this Period
- 5775.05

Memo Item

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

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

- 5115.43

**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)
HOUSE CONSERVATIVES FUND

A. PEX

Full Name (Last, First, Middle Initial)

Mailing Address 1375 BROADWAY
ROOM 1100

City NEW YORK State Zip Code 10018-7001

Purpose of Disbursement
CREDIT: INADVERTENT EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 28 / 2025

FEC Identification Number: C

Transaction ID : B51FC53EB4

Amount of Each Disbursement this Period: - 153.46

Memo Item

B. POTBELLY

Full Name (Last, First, Middle Initial)

Mailing Address 4731 ELM ST

City BETHESDA State MD Zip Code 20814-2954

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 22 / 2025

FEC Identification Number: C

Transaction ID : B3FCC07410

Amount of Each Disbursement this Period: 455.25

Memo Item

C. REPUBCLICK

Full Name (Last, First, Middle Initial)

Mailing Address 4780 ASHFORD DUNWOODY RD

City DUNWOODY State GA Zip Code 30338-5564

Purpose of Disbursement
STRATEGIC PAC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 11 / 2025

FEC Identification Number: C

Transaction ID : B12D62367C

Amount of Each Disbursement this Period: 425.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 726.79

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

**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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. SUSAN GAGE CATERERS

Mailing Address 7100 OLD LANDOVER ROAD

City HYATTSVILLE State MD Zip Code 20785-1500

Purpose of Disbursement CATERING
Candidate Name
Category/Type 003

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

Date of Disbursement
MM / DD / YYYY
03 / 17 / 2025

FEC Identification Number
C
Transaction ID : BCA22115A5
Amount of Each Disbursement this Period
4912.58

Memo Item

Full Name (Last, First, Middle Initial)

B. SUSAN GAGE CATERERS

Mailing Address 7100 OLD LANDOVER ROAD

City HYATTSVILLE State MD Zip Code 20785-1500

Purpose of Disbursement CATERING
Candidate Name
Category/Type 003

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

Date of Disbursement
MM / DD / YYYY
04 / 08 / 2025

FEC Identification Number
C
Transaction ID : B2FECA8792!
Amount of Each Disbursement this Period
4912.58

Memo Item

Full Name (Last, First, Middle Initial)

C. SUSAN GAGE CATERERS

Mailing Address 7100 OLD LANDOVER ROAD

City HYATTSVILLE State MD Zip Code 20785-1500

Purpose of Disbursement CATERING
Candidate Name
Category/Type 003

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

Date of Disbursement
MM / DD / YYYY
05 / 16 / 2025

FEC Identification Number
C
Transaction ID : BF1714554FI
Amount of Each Disbursement this Period
5022.58

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 14847.74

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

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)
HOUSE CONSERVATIVES FUND

A. SUSAN GAGE CATERERS

Full Name (Last, First, Middle Initial)

Mailing Address 7100 OLD LANDOVER ROAD

City HYATTSVILLE State MD Zip Code 20785-1500

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 17 / 2025

FEC Identification Number: C

Transaction ID : B483ABBF2

Amount of Each Disbursement this Period: 5022.58

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)

Mailing Address 2311 WILSON BLVD STE 200

City ARLINGTON State VA Zip Code 22201-5420

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2025

FEC Identification Number: C

Transaction ID : B424E6FBE01

Amount of Each Disbursement this Period: 44373.01

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)

Mailing Address 2311 WILSON BLVD STE 200

City ARLINGTON State VA Zip Code 22201-5420

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2025

FEC Identification Number: C

Transaction ID : B98CC37B8F

Amount of Each Disbursement this Period: 19549.68

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 68945.27

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

**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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 2311 WILSON BLVD
STE 200

City ARLINGTON State VA Zip Code 22201-5420

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2025

FEC Identification Number

C [REDACTED]

Transaction ID : BE937BE652

Amount of Each Disbursement this Period

[REDACTED] 19549.68

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1445 MARKET ST
400

City SAN FRANCISCO State CA Zip Code 94103-1308

Purpose of Disbursement
CATERING

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2025

FEC Identification Number

C [REDACTED]

Transaction ID : B2B49466ED

Amount of Each Disbursement this Period

[REDACTED] 556.51

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement
E-MERCHANT FEES/SEE MEMO ITEMS

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : BC2E3CC56

Amount of Each Disbursement this Period

[REDACTED] 271.59

Memo Item

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

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

[REDACTED] 20377.78

[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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

Form A: WINRED TECHNICAL SERVICES. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: WINRED TECHNICAL SERVICES. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: WINRED TECHNICAL SERVICES. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 697.38
TOTAL This Period (last page this line number only)

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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement E-MERCHANT FEES
Candidate Name
Category/Type 001

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

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2025

FEC Identification Number
C
Transaction ID : BFFB1E223F
Amount of Each Disbursement this Period
560.20

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement E-MERCHANT FEES
Candidate Name
Category/Type 001

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

Date of Disbursement
MM / DD / YYYY
04 / 07 / 2025

FEC Identification Number
C
Transaction ID : B9267A90F5I
Amount of Each Disbursement this Period
189.94

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement E-MERCHANT FEES
Candidate Name
Category/Type 001

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

Date of Disbursement
MM / DD / YYYY
04 / 14 / 2025

FEC Identification Number
C
Transaction ID : BF2BF15407
Amount of Each Disbursement this Period
199.38

Memo Item

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

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

949.52

**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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement E-MERCHANT FEES
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
04 / 21 / 2025

FEC Identification Number
C
Transaction ID : **BF0BF3C033**
Amount of Each Disbursement this Period
276.76

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement E-MERCHANT FEES
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
04 / 28 / 2025

FEC Identification Number
C
Transaction ID : **B49BDD135F**
Amount of Each Disbursement this Period
125.74

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement E-MERCHANT FEES
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
05 / 05 / 2025

FEC Identification Number
C
Transaction ID : **B44AD85055**
Amount of Each Disbursement this Period
146.59

Memo Item

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

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

549.09

**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)

HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement
E-MERCHANT FEES

001

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	5		1	2		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : B31B21CC51

Amount of Each Disbursement this Period

[REDACTED]	205.92
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement
E-MERCHANT FEES

001

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	5		1	9		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : B87DAF31A8

Amount of Each Disbursement this Period

[REDACTED]	273.97
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement
E-MERCHANT FEES

001

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	5		2	7		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : BEDFB0AC2

Amount of Each Disbursement this Period

[REDACTED]	84.02
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Memo Item

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

[REDACTED]	563.91
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TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	
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**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)

HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement
E-MERCHANT FEES

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B6B9D3458C

Amount of Each Disbursement this Period

112.99

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement
E-MERCHANT FEES

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		09		2025

FEC Identification Number

C

Transaction ID : B399C9A660

Amount of Each Disbursement this Period

191.41

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement
E-MERCHANT FEES

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		16		2025

FEC Identification Number

C

Transaction ID : BA2154327A

Amount of Each Disbursement this Period

127.63

Memo Item

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

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

432.03

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**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)

HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement
E-MERCHANT FEES

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		23		2025

FEC Identification Number

C

Transaction ID : B3847066363

Amount of Each Disbursement this Period

136.27

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement
E-MERCHANT FEES

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2025

FEC Identification Number

C

Transaction ID : B85D5BE856'

Amount of Each Disbursement this Period

174.40

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	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).....▶

310.67

221871.46

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. AARON BEAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 08 / 2025
Mailing Address 2640A MITCHAM DR		FEC Identification Number C C00816983 Transaction ID : BDAE8D732C
City TALLAHASSEE	State FL	Zip Code 32308-5400
Purpose of Disbursement POLITICAL CONTRIBUTION		011 Category/ Type
Candidate Name BEAN, AARON, P., ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 04	

Full Name (Last, First, Middle Initial) B. ABE FOR ARIZONA		Date of Disbursement MM / DD / YYYY 04 / 23 / 2025
Mailing Address PO BOX 2135		FEC Identification Number C C00853986 Transaction ID : B5DE06CCFF
City PEORIA	State AZ	Zip Code 85380-2135
Purpose of Disbursement POLITICAL CONTRIBUTION		011 Category/ Type
Candidate Name HAMADEH, ABRAHAM, , ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: AZ	District: 08	

Full Name (Last, First, Middle Initial) C. ANNA PAULINA LUNA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 19 / 2025
Mailing Address 1201 GANDY BLVD N P.O. BOX 23064		FEC Identification Number C C00718239 Transaction ID : B36C52794F
City SAINT PETERSBURG	State FL	Zip Code 33742-8001
Purpose of Disbursement POLITICAL CONTRIBUTION		011 Category/ Type
Candidate Name PAULINA LUNA, ANNA, , ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 13	

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. ASHLEY HINSON FOR CONGRESS

Mailing Address PO BOX 811

City MARION State IA Zip Code 52302-0811

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name ARENHOLZ, ASHLEY, HINSON, ,

Office Sought: House Senate President Disbursement For: 2026 Primary General Other (specify) State: IA District: 02

Date of Disbursement 05 / 08 / 2025

FEC Identification Number C00706267 Transaction ID : BB7C5AF505 Amount of Each Disbursement this Period 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CELESTE FOR CONGRESS

Mailing Address P. O. BOX 2410

City CEDAR CITY State UT Zip Code 84721-2410

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name MALOY, CELESTE, , ,

Office Sought: House Senate President Disbursement For: 2026 Primary General Other (specify) State: UT District: 02

Date of Disbursement 05 / 08 / 2025

FEC Identification Number C00842765 Transaction ID : B6FDFEEF4D Amount of Each Disbursement this Period 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CISCOMANI FOR CONGRESS

Mailing Address PO BOX 35103

City TUCSON State AZ Zip Code 85740-5103

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name CISCOMANI, JUAN, , ,

Office Sought: House Senate President Disbursement For: 2026 Primary General Other (specify) State: AZ District: 06

Date of Disbursement 03 / 19 / 2025

FEC Identification Number C00786194 Transaction ID : BDE6B5A4A Amount of Each Disbursement this Period 2000.00

Memo Item

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

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

6000.00

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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. CORY MILLS FOR CONGRESS

Mailing Address PMB 288
501 N. ORLANDO AVENUE SUITE 313

City WINTER PARK State FL Zip Code 32789-7310

Purpose of Disbursement VOID: POLITICAL CONTRIBUTION
Category/Type **011**

Candidate Name MILLS, CORY, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: FL District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2025

FEC Identification Number

C C00774943
Transaction ID : B358A76FE2!
Amount of Each Disbursement this Period
- 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DAN NEWHOUSE FOR CONGRESS

Mailing Address PO BOX 10949

City YAKIMA State WA Zip Code 98909

Purpose of Disbursement POLITICAL CONTRIBUTION
Category/Type **011**

Candidate Name NEWHOUSE, DAN, , ,

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

State: WA District: 04

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 20 / 2025

FEC Identification Number

C C00559393
Transaction ID : B22ECD72C6
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DAVID ROUZER FOR CONGRESS

Mailing Address PO BOX 2267

City SMITHFIELD State NC Zip Code 27577

Purpose of Disbursement POLITICAL CONTRIBUTION
Category/Type **011**

Candidate Name ROUZER, DAVID CHESTON, , ,

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

State: NC District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 20 / 2025

FEC Identification Number

C C00501643
Transaction ID : B783FD7E04
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

3000.00

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. DEREK SCHMIDT FOR CONGRESS

Mailing Address PO BOX 4010

City TOPEKA State KS Zip Code 66604-0010

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name SCHMIDT, DEREK, , ,

Office Sought: House Senate President Disbursement For: 2026 Primary General Other (specify) State: KS District: 02

Date of Disbursement 05 / 08 / 2025

FEC Identification Number C00877373 Transaction ID : B951D6D532 Amount of Each Disbursement this Period 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FINSTAD FOR CONGRESS

Mailing Address PO BOX 923

City NEW ULM State MN Zip Code 56073-0923

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name FINSTAD, BRAD, , ,

Office Sought: House Senate President Disbursement For: 2026 Primary General Other (specify) State: MN District: 01

Date of Disbursement 06 / 20 / 2025

FEC Identification Number C00807743 Transaction ID : B5391C1FA0 Amount of Each Disbursement this Period 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JIMMY PATRONIS, INC.

Mailing Address 421 OFFICE PARK DR

City MOUNTAIN BRK State AL Zip Code 35223-2411

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name PATRONIS, JIMMY, JR., ,

Office Sought: House Senate President Disbursement For: 2025 Primary General Other (specify) SPECIAL State: FL District: 01

Date of Disbursement 03 / 18 / 2025

FEC Identification Number C00893594 Transaction ID : BE75FB93C8 Amount of Each Disbursement this Period 5000.00

Memo Item

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

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

9000.00

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JIMMY PATRONIS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2025

Mailing Address 421 OFFICE PARK DR

FEC Identification Number

C C00893594

Transaction ID : BC6E55C291

Amount of Each Disbursement this Period

2000.00

Memo Item

City MOUNTAIN BRK State AL Zip Code 35223-2411

Purpose of Disbursement POLITICAL CONTRIBUTION **011** Category/Type

Candidate Name PATRONIS, JIMMY, JR., ,

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

State: FL District: 01

Full Name (Last, First, Middle Initial)

B. FRIENDS OF TIM MOORE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2025

Mailing Address PO BOX 97275

FEC Identification Number

C C00856005

Transaction ID : B99624BF244

Amount of Each Disbursement this Period

2000.00

Memo Item

City RALEIGH State NC Zip Code 27624-7275

Purpose of Disbursement POLITICAL CONTRIBUTION **011** Category/Type

Candidate Name MOORE, TIM, , ,

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

State: NC District: 14

Full Name (Last, First, Middle Initial)

C. IOWANS FOR ZACH NUNN

Date of Disbursement

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

Mailing Address PO BOX 8036

FEC Identification Number

C C00784389

Transaction ID : BCABA14A2

Amount of Each Disbursement this Period

2000.00

Memo Item

City DES MOINES State IA Zip Code 50301-8036

Purpose of Disbursement POLITICAL CONTRIBUTION **011** Category/Type

Candidate Name NUNN, ZACH, , ,

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

State: IA District: 03

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

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

6000.00

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. JAMES MOYLAN FOR CONGRESS

Mailing Address P.O. BOX 6394

City TAMUNING State GU Zip Code 96931-6394

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name MOYLAN, JAMES, C., , Office Sought: House Senate President Disbursement For: 2026 Primary General Other (specify) ▼

State: GU District: 00

Date of Disbursement 06 / 20 / 2025

FEC Identification Number C00809343 Transaction ID : B0599A1988 Amount of Each Disbursement this Period 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JEFF CRANK FOR CONGRESS

Mailing Address 9235 N UNION BLVD STE 150

City COLORADO SPRINGS State CO Zip Code 80920-7833

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name CRANK, JEFF, , , Office Sought: House Senate President Disbursement For: 2026 Primary General Other (specify) ▼

State: CO District: 05

Date of Disbursement 04 / 23 / 2025

FEC Identification Number C00865592 Transaction ID : BB8E531F13 Amount of Each Disbursement this Period 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JEFF HURD FOR CONGRESS

Mailing Address 2695 PATTERSON RD STE 2

City GRAND JUNCTION State CO Zip Code 81506-8815

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name HURD, JEFFREY, , , Office Sought: House Senate President Disbursement For: 2026 Primary General Other (specify) ▼

State: CO District: 03

Date of Disbursement 03 / 19 / 2025

FEC Identification Number C00848333 Transaction ID : BF892645AE Amount of Each Disbursement this Period 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... 6000.00

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. JOE WILSON FOR CONGRESS

Mailing Address PO BOX 2145

City
WEST COLUMBIA

State
SC

Zip Code
29171-2145

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
WILSON, JOE THE, HON., ,

Office Sought: House
 Senate
 President
State: SC District: 02

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 20 / 2025

FEC Identification Number

C C00368522

Transaction ID : B82E881D09I

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN JAMES FOR CONGRESS, INC.

Mailing Address P.O. BOX 628

City
SAINT CLAIR SHORES

State
MI

Zip Code
48080-0628

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
JAMES, JOHN, , ,

Office Sought: House
 Senate
 President
State: MI District: 10

Disbursement For: 2026
 Primary General
 Other (specify)

Date of Disbursement

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

FEC Identification Number

C C00803502

Transaction ID : B391FCD1C5I

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JOHN JAMES FOR CONGRESS, INC.

Mailing Address P.O. BOX 628

City
SAINT CLAIR SHORES

State
MI

Zip Code
48080-0628

Purpose of Disbursement
VOID POLITICAL CONTRIBUTION. DUPLICATE PAYMENT

011
Category/
Type

Candidate Name
JAMES, JOHN, , ,

Office Sought: House
 Senate
 President
State: MI District: 10

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C C00803502

Transaction ID : B5477E98FC

Amount of Each Disbursement this Period

- 2000.00

Memo Item

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

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

2000.00

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 checked="" 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)

HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. LAUREL LEE FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2025

Mailing Address P.O. BOX 2743

City
BRANDON

State
FL

Zip Code
33509-2743

FEC Identification Number

C C00815373

Transaction ID : B181C50A7E

Amount of Each Disbursement this Period

2000.00

Memo Item

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
LEE, LAUREL, MRS., ,

Office Sought: House
 Senate
 President
State: FL District: 15

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. MARK HARRIS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		20		2025

Mailing Address PO BOX 77451

City
CHARLOTTE

State
NC

Zip Code
28271

FEC Identification Number

C C00649236

Transaction ID : BE9E5BBF4C

Amount of Each Disbursement this Period

2000.00

Memo Item

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
HARRIS, MARK, , ,

Office Sought: House
 Senate
 President
State: NC District: 08

Disbursement For: 2026
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial)

C. MCGUIRE FOR VIRGINIA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2025

Mailing Address PO BOX 242

City
MANAKIN SABOT

State
VA

Zip Code
23103-0242

FEC Identification Number

C C00856831

Transaction ID : B3D2169D9E

Amount of Each Disbursement this Period

- 1000.00

Memo Item

Purpose of Disbursement
VOID: POLITICAL CONTRIBUTION FROM 9/23/2024. NO REISSUE.

011
Category/
Type

Candidate Name
MCGUIRE, JOHN, , ,

Office Sought: House
 Senate
 President
State: VA District: 05

Disbursement For: 2024
 Primary General
 Other (specify) ▼

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

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

3000.00

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)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Box 23 is checked.

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

Form A: MONICA FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: PAUL JUNGE FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: RANDY FINE FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 4500.00
TOTAL This Period (last page this line number only)

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. RANDY FINE FOR CONGRESS

Mailing Address C/O RED CURVE SOLUTIONS, LLC
138 CONANT ST, STE 401

City BEVERLY State MA Zip Code 01915-1672

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
FINE, RANDY, , ,

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: MA District: 06

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2025

FEC Identification Number

C C00893271

Transaction ID : B5FF63E527f

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STEIL FOR WISCONSIN, INC.

Mailing Address 1818 MILTON AVENUE #1448

City JANESVILLE State WI Zip Code 53545

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
STEIL, BRYAN GEORGE, , ,

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: WI District: 01

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2025

FEC Identification Number

C C00677286

Transaction ID : B04DB0C844f

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. THE PAT HARRIGAN COMMITTEE

Mailing Address PO BOX 97275

City RALEIGH State NC Zip Code 27624-7275

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
HARRIGAN, PAT, , ,

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: NC District: 10

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2025

FEC Identification Number

C C00802298

Transaction ID : B3EC9E8028f

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

6000.00

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. VAN DREW FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 671

City CAPE MAY COURT HOUSE State NJ Zip Code 08210-0671

Purpose of Disbursement POLITICAL CONTRIBUTION Category/Type 011

Candidate Name VAN DREW, JEFF, MR, ,

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

State: NJ District: 02

Date of Disbursement: 04 / 23 / 2025

FEC Identification Number: C00661868
Transaction ID : B4E57565C6:
Amount of Each Disbursement this Period: 2000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: C
Amount of Each Disbursement this Period:
 Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: C
Amount of Each Disbursement this Period:
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	53500.00

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. ACKLES, JOHN, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2025	
Mailing Address 190 KEN GARRISON RD.		FEC Identification Number C [REDACTED] Transaction ID : BC2F3270BA	
City DALLAS	State NC	Zip Code 28034	Amount of Each Disbursement this Period 14.10
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) B. ACKLES, JOHN, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2025	
Mailing Address 190 KEN GARRISON RD.		FEC Identification Number C [REDACTED] Transaction ID : B3560EC6624	
City DALLAS	State NC	Zip Code 28034	Amount of Each Disbursement this Period 9.40
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) C. AINSWORTH, ANN, , ,		Date of Disbursement MM / DD / YYYY 04 / 21 / 2025	
Mailing Address 5737 WEST ALAMO DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B6FBF7117D	
City LITTLETON	State CO	Zip Code 80123	Amount of Each Disbursement this Period 14.10
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	37.60
TOTAL This Period (last page this line number only).....▶	

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. AINSWORTH, ANN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5737 WEST ALAMO DRIVE

City LITTLETON State CO Zip Code 80123

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2025

FEC Identification Number: C

Transaction ID : B788C45043E

Amount of Each Disbursement this Period: 14.10

Memo Item

B. ALKIRE, MAUNIE LOU, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 SUMMIT DRIVE

City KIMBERLING CITY State MO Zip Code 65686

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2025

FEC Identification Number: C

Transaction ID : BE787FFD63I

Amount of Each Disbursement this Period: 9.40

Memo Item

C. ALKIRE, MAUNIE LOU, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 SUMMIT DRIVE

City KIMBERLING CITY State MO Zip Code 65686

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2025

FEC Identification Number: C

Transaction ID : B076ED0D73I

Amount of Each Disbursement this Period: 9.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 32.90

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

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. ALKIRE, MAUNIE LOU, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 6 SUMMIT DRIVE

City KIMBERLING CITY State MO Zip Code 65686

Purpose of Disbursement REFUND OF CONTRIBUTION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 05 / 2025

FEC Identification Number: C
Transaction ID : B1BF8D4896
Amount of Each Disbursement this Period: 9.40

Memo Item

B. ANDERSON, MIKE, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 1620 CARNEGIE WAY

City EL DORADO HILLS State CA Zip Code 95762

Purpose of Disbursement REFUND OF CONTRIBUTION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 28 / 2025

FEC Identification Number: C
Transaction ID : B01726A312A
Amount of Each Disbursement this Period: 4.70

Memo Item

C. ASCHERL, GEORGIA, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 1419 PADDOCKS COURT

City CROWNSVILLE State MD Zip Code 21032

Purpose of Disbursement REFUND OF CONTRIBUTION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 03 / 2025

FEC Identification Number: C
Transaction ID : B1DAFB2DE
Amount of Each Disbursement this Period: 27.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 41.36

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

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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. BARKER, TOM, , ,		Date of Disbursement MM / DD / YYYY 03 / 17 / 2025	
Mailing Address 12722 PANORAMA VIEW		FEC Identification Number C [REDACTED] Transaction ID : B75EFD7C88	
City SANTA ANA	State CA	Zip Code 92705	Amount of Each Disbursement this Period 94.00
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) B. BARKER, TOM, , ,		Date of Disbursement MM / DD / YYYY 03 / 24 / 2025	
Mailing Address 12722 PANORAMA VIEW		FEC Identification Number C [REDACTED] Transaction ID : B9B03B1FF8I	
City SANTA ANA	State CA	Zip Code 92705	Amount of Each Disbursement this Period 94.00
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) C. BATTISTELLO, SHEILA, , ,		Date of Disbursement MM / DD / YYYY 06 / 23 / 2025	
Mailing Address 847 BERKELEY ST.		FEC Identification Number C [REDACTED] Transaction ID : B02976D4BC	
City BOCA RATON	State FL	Zip Code 33487	Amount of Each Disbursement this Period 4.70
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	192.70
TOTAL This Period (last page this line number only).....▶	

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. BECK, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 467

City THOMPSONS STATION State TN Zip Code 37179

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2025

FEC Identification Number: C

Transaction ID : BB9CF7FAD7

Amount of Each Disbursement this Period: 9.40

Memo Item

B. BELANGER, DIANE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3041 EAGLES NEST WAY

City PORT SAINT LUCIE State FL Zip Code 34952

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2025

FEC Identification Number: C

Transaction ID : BFCC119E10I

Amount of Each Disbursement this Period: 3299.40

Memo Item

C. BERGAZIN, TERESA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 21392 STANS LANE

City LAGUNA BEACH State CA Zip Code 92651

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2025

FEC Identification Number: C

Transaction ID : B5BF6CE30C

Amount of Each Disbursement this Period: 2.82

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3311.62

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. BERGAZIN, TERESA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 21392 STANS LANE

City LAGUNA BEACH State CA Zip Code 92651

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B3BC288AEF

Amount of Each Disbursement this Period: 2.82

Memo Item

B. BERGAZIN, TERESA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 21392 STANS LANE

City LAGUNA BEACH State CA Zip Code 92651

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : BB7755500A/

Amount of Each Disbursement this Period: 2.82

Memo Item

C. BETMAN, RACHEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5 GALLO WAY

City EDISON State NJ Zip Code 08820

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B0A0BD24F2

Amount of Each Disbursement this Period: 27.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 32.90

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. BETMAN, RACHEL, , ,		Date of Disbursement MM / DD / YYYY 03 / 31 / 2025	
Mailing Address 5 GALLO WAY		FEC Identification Number C [REDACTED] Transaction ID : B64E76CB32	
City EDISON	State NJ	Zip Code 08820	Amount of Each Disbursement this Period 5.00
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) B. BETMAN, RACHEL, , ,		Date of Disbursement MM / DD / YYYY 03 / 31 / 2025	
Mailing Address 5 GALLO WAY		FEC Identification Number C [REDACTED] Transaction ID : B462FB0255C	
City EDISON	State NJ	Zip Code 08820	Amount of Each Disbursement this Period 27.26
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) C. BOND, WHITNEY, , ,		Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 2915 E 74TH AT		FEC Identification Number C [REDACTED] Transaction ID : B8D4510DA6	
City TULSA	State OK	Zip Code 74136	Amount of Each Disbursement this Period 27.26
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	59.52
TOTAL This Period (last page this line number only).....▶	

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. BONHAM, REED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2208 MEIERWOOD AVE,

City SANGER State CA Zip Code 93657

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2025

FEC Identification Number: C

Transaction ID : B7A8A37E57

Amount of Each Disbursement this Period: 9.40

Memo Item

B. BRANCH, DIANE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 320 CEDARCOVE ST

City PITTSBURGH State PA Zip Code 15227

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 27 / 2025

FEC Identification Number: C

Transaction ID : BA03A4F567

Amount of Each Disbursement this Period: 0.94

Memo Item

C. BROWN, RYAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 185 EAST BROAD HOLLOW DRIVE

City WOODLAND HILLS State UT Zip Code 84653

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2025

FEC Identification Number: C

Transaction ID : BAA1CAAE1

Amount of Each Disbursement this Period: 1.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11.34

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

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)

Grid for line numbers 21b-30b with checkboxes. 28a is checked.

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

Form A: BROWN, RYAN, , , . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (REFUND OF CONTRIBUTION), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (04/21/2025), FEC Identification Number, Transaction ID (BC15D8B146), and Amount of Each Disbursement (1.00).

Form B: BURNS, LOUIS, , , . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (REFUND OF CONTRIBUTION), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/24/2025), FEC Identification Number, Transaction ID (B74F06C3A8), and Amount of Each Disbursement (27.26).

Form C: BURNS, LOUIS, , , . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (REFUND OF CONTRIBUTION), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/24/2025), FEC Identification Number, Transaction ID (BAAC44EBB), and Amount of Each Disbursement (27.26).

SUBTOTAL of Disbursements This Page (optional) 55.52
TOTAL This Period (last page this line number only)

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. CAMPBELL, EMMA, , ,		Date of Disbursement MM / DD / YYYY 06 / 16 / 2025	
Mailing Address 299 SALISBURY AVE		FEC Identification Number C [REDACTED] Transaction ID : B263A0E55E	
City GOLETA	State CA	Zip Code 93117	Amount of Each Disbursement this Period 0.94
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) B. CAMPBELL, EMMA, , ,		Date of Disbursement MM / DD / YYYY 06 / 16 / 2025	
Mailing Address 299 SALISBURY AVE		FEC Identification Number C [REDACTED] Transaction ID : BD525345752	
City GOLETA	State CA	Zip Code 93117	Amount of Each Disbursement this Period 0.94
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) C. CHAMPAGNE, RONALD, , ,		Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 28 CYNTHIA PLACE		FEC Identification Number C [REDACTED] Transaction ID : B2F49AA079	
City FEEDING HILLS	State MA	Zip Code 01030	Amount of Each Disbursement this Period 47.00
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	48.88
TOTAL This Period (last page this line number only).....▶	

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. CHAMPION, JUDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1100 GERMAN SCHOOL RD APT 240

City RICHMOND State VA Zip Code 23225

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2025

FEC Identification Number: C

Transaction ID : B2B436DEC5

Amount of Each Disbursement this Period: 0.94

Memo Item

B. CHRESTENSEN, PAUL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 148 EDGEMERE WAY S

City NAPLES State FL Zip Code 34105

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2025

FEC Identification Number: C

Transaction ID : B242F5AE87C

Amount of Each Disbursement this Period: 14.10

Memo Item

C. CHRESTENSEN, PAUL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 148 EDGEMERE WAY S

City NAPLES State FL Zip Code 34105

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2025

FEC Identification Number: C

Transaction ID : B78FA6654E

Amount of Each Disbursement this Period: 14.85

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 29.89

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. CHRESTENSEN, PAUL, , ,

Mailing Address 148 EDGEMERE WAY S

City
NAPLES

State
FL

Zip Code
34105

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Category/
Type

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
0	3		1	7		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : B4E39840285

Amount of Each Disbursement this Period

[REDACTED]	23.50
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

B. CLOSMORE, RAYMOND, , ,

Mailing Address 830 CHARLTON ST

City
ST PAUL

State
MN

Zip Code
55118

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Category/
Type

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
0	6		0	9		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : B5182D21505

Amount of Each Disbursement this Period

[REDACTED]	32.90
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

C. CLOSMORE, RAYMOND, , ,

Mailing Address 830 CHARLTON ST

City
ST PAUL

State
MN

Zip Code
55118

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Category/
Type

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
0	6		0	9		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : B7CB9AD33!

Amount of Each Disbursement this Period

[REDACTED]	32.90
------------	-------

Memo Item

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

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

[REDACTED]	89.30
------------	-------

[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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. CLOSMORE, RAYMOND, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 830 CHARLTON ST

City ST PAUL State MN Zip Code 55118

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C

Transaction ID : B20FA794FFI

Amount of Each Disbursement this Period: 32.90

Memo Item

B. CLOSMORE, RAYMOND, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 830 CHARLTON ST

City ST PAUL State MN Zip Code 55118

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C

Transaction ID : B2EE43B3E5I

Amount of Each Disbursement this Period: 32.90

Memo Item

C. CLOSMORE, RAYMOND, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 830 CHARLTON ST

City ST PAUL State MN Zip Code 55118

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C

Transaction ID : B7F3E29FD6

Amount of Each Disbursement this Period: 32.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 98.70

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

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. CLOSMORE, RAYMOND, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 830 CHARLTON ST

City ST PAUL State MN Zip Code 55118

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C

Transaction ID : B6878D00BB

Amount of Each Disbursement this Period: 32.90

Memo Item

B. DALTON, HELEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 731 PINE ST

City MEADVILLE State PA Zip Code 16335

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2025

FEC Identification Number: C

Transaction ID : BE48BB8FF1

Amount of Each Disbursement this Period: 3290.00

Memo Item

C. D'ANGELO, LARRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16828 W PASEO WAY

City GOODYEAR State AZ Zip Code 85338

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2025

FEC Identification Number: C

Transaction ID : B4EDA4B14

Amount of Each Disbursement this Period: 32.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3355.80

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

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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
HOUSE CONSERVATIVES FUND

A. DEHN, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 20350 TAMARACK

City HOWARD CITY State MI Zip Code 49329

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B8176A01CA

Amount of Each Disbursement this Period: 27.26

Memo Item

B. DIAZBRATTON, BENITA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5029 E FARMDALE AVE

City MESA State AZ Zip Code 85206

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B0D4654D7F1

Amount of Each Disbursement this Period: 9.40

Memo Item

C. EDWARDS, GARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2090 WEST FIRST STREET #1508

City FORT MYERS State FL Zip Code 33901

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B5FE7D56A4

Amount of Each Disbursement this Period: 47.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 83.66

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. EDWARDS, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2869 SOUTHERN MAGNOLIA DRAFT

City WINNABOW State NC Zip Code 28479

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 16 / 2025

FEC Identification Number C

Transaction ID : BF263949312

Amount of Each Disbursement this Period 14.10

Memo Item

B. EDWARDS, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2869 SOUTHERN MAGNOLIA DRAFT

City WINNABOW State NC Zip Code 28479

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 16 / 2025

FEC Identification Number C

Transaction ID : B7C79E24D7I

Amount of Each Disbursement this Period 14.10

Memo Item

C. EDWARDS, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2869 SOUTHERN MAGNOLIA DRAFT

City WINNABOW State NC Zip Code 28479

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 16 / 2025

FEC Identification Number C

Transaction ID : B083478AB7

Amount of Each Disbursement this Period 14.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 42.30

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

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)

Form for line numbers 21b-30b with checkboxes. 28a is checked.

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

Form A: EMBRY, BRENDA, , , . Includes fields for Full Name, Mailing Address, City (BARHAMSVILLE), State (VA), Zip Code (23011), Purpose of Disbursement (REFUND OF CONTRIBUTION), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/03/2025), FEC Identification Number, Transaction ID (B3AD331CA7), Amount of Each Disbursement (27.26), and Memo Item checkbox.

Form B: FAWSETT, JEFFREY, , , . Includes fields for Full Name, Mailing Address, City (GAINESVILLE), State (FL), Zip Code (32608), Purpose of Disbursement (REFUND OF CONTRIBUTION), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/10/2025), FEC Identification Number, Transaction ID (BC00D11D1A), Amount of Each Disbursement (27.26), and Memo Item checkbox.

Form C: FUGGER, KAREN, , , . Includes fields for Full Name, Mailing Address, City (DADEVILLE), State (AL), Zip Code (36853), Purpose of Disbursement (REFUND OF CONTRIBUTION), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (04/07/2025), FEC Identification Number, Transaction ID (BE238E6F88), Amount of Each Disbursement (27.26), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 81.78
TOTAL This Period (last page this line number only)

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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. GAUDREAU, LAURIE, , ,		Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 293 VANDERBILT DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B89A3A5722: Amount of Each Disbursement this Period [REDACTED] 3.76	
City AIKEN	State SC	Zip Code 29803	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. GAUDREAU, LAURIE, , ,		Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 293 VANDERBILT DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B66C2076583 Amount of Each Disbursement this Period [REDACTED] 3.76	
City AIKEN	State SC	Zip Code 29803	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. GAYSN, AUDREY, , ,		Date of Disbursement MM / DD / YYYY 03 / 31 / 2025	
Mailing Address 2710BUTTERFLY PL .		FEC Identification Number C [REDACTED] Transaction ID : B4193C6224: Amount of Each Disbursement this Period [REDACTED] 23.50	
City INDIAN HEAD	State MD	Zip Code 20640	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 31.02
TOTAL This Period (last page this line number only).....▶	[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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. GLUSMAN, ADRIENNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5416 GIPSY AVE

City LAS VEGAS State NV Zip Code 89107

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2025

FEC Identification Number: C

Transaction ID : **BD8F66E14D**

Amount of Each Disbursement this Period: 2.82

Memo Item

B. GOFF, VICTOR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 66 FAIRMONT AVENUE

City PAWTUCKET State RI Zip Code 02860

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2025

FEC Identification Number: C

Transaction ID : **BC066059D1!**

Amount of Each Disbursement this Period: 14.10

Memo Item

C. GOODLEY, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3747 WILLIAMS LANDING CIRCLE

City TAMPA State FL Zip Code 33610

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2025

FEC Identification Number: C

Transaction ID : **B195B7695D**

Amount of Each Disbursement this Period: 14.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 31.02

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

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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
HOUSE CONSERVATIVES FUND

A. GOODLEY, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3747 WILLIAMS LANDING CIRCLE

City TAMPA State FL Zip Code 33610

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2025

FEC Identification Number: C

Transaction ID : **BF297F424F**

Amount of Each Disbursement this Period: 4.70

Memo Item

B. GREICO, CATHY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3220 OLD YORKTOWN RD

City YORKTOWN HEIGHTS State NY Zip Code 10598

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2025

FEC Identification Number: C

Transaction ID : **BF8E51F3C8**

Amount of Each Disbursement this Period: 0.94

Memo Item

C. GRIFFIN, DOROTHY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2465 KENSINGTON GREENS DR

City SUN CITY CENTER State FL Zip Code 33573

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2025

FEC Identification Number: C

Transaction ID : **BDA8A01BF**

Amount of Each Disbursement this Period: 27.26

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	32.90
TOTAL This Period (last page this line number only).....▶	

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. GROPPER, MAUREEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4876 BERRY LEAF PL

City HILLIARD State OH Zip Code 43026

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2025

FEC Identification Number: C

Transaction ID : B99ED79927I

Amount of Each Disbursement this Period: 1.88

Memo Item

B. GROPPER, MAUREEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4876 BERRY LEAF PL

City HILLIARD State OH Zip Code 43026

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2025

FEC Identification Number: C

Transaction ID : BA8E32F93CI

Amount of Each Disbursement this Period: 1.88

Memo Item

C. GROPPER, MAUREEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4876 BERRY LEAF PL

City HILLIARD State OH Zip Code 43026

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2025

FEC Identification Number: C

Transaction ID : B8C4459E82

Amount of Each Disbursement this Period: 1.88

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5.64

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. HARVEY, ROLAND, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7917 MCPHERSON RD.

City LAREDO State TX Zip Code 78045

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B8562854C62

Amount of Each Disbursement this Period: 9.40

Memo Item

B. HEBEL, THERESA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 72595 SORREL DRIVE

City BRUCE TOWNSHIP State MI Zip Code 48065

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B9E3623C188

Amount of Each Disbursement this Period: 14.10

Memo Item

C. HERRON, DIANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 35 FLORAL DRIVE

City BROOKINGS State OR Zip Code 97415

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : BDE619152A

Amount of Each Disbursement this Period: 0.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 24.44

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. JAUDES, MARY K, K., ,

Mailing Address 12657 BRADFORD WOODS DRIVE

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

010
Category/
Type

Date of Disbursement
MM / DD / YYYY
06 / 23 / 2025

FEC Identification Number
C
Transaction ID : B5EFBDD6AI
Amount of Each Disbursement this Period
0.94

Memo Item

Full Name (Last, First, Middle Initial)

B. JAUDES, MARY K, K., ,

Mailing Address 12657 BRADFORD WOODS DRIVE

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

010
Category/
Type

Date of Disbursement
MM / DD / YYYY
06 / 23 / 2025

FEC Identification Number
C
Transaction ID : B1F12EA7E1I
Amount of Each Disbursement this Period
0.94

Memo Item

Full Name (Last, First, Middle Initial)

C. JAUDES, MARY K, K., ,

Mailing Address 12657 BRADFORD WOODS DRIVE

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement
REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

010
Category/
Type

Date of Disbursement
MM / DD / YYYY
06 / 23 / 2025

FEC Identification Number
C
Transaction ID : B764020D9F
Amount of Each Disbursement this Period
0.94

Memo Item

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

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

2.82

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. JAUDES, MARY K, K., ,

Full Name (Last, First, Middle Initial)

Mailing Address 12657 BRADFORD WOODS DRIVE

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 23 / 2025

FEC Identification Number: C

Transaction ID : BEA88E3584!

Amount of Each Disbursement this Period: 0.94

Memo Item

B. JOHNSON, MARSHA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 481 WINDMILL LN

City FAIRVIEW State TX Zip Code 75069

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2025

FEC Identification Number: C

Transaction ID : BE7F627DCD

Amount of Each Disbursement this Period: 27.26

Memo Item

C. KITLER, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7942 MARIAVILLE RD

City DELANSON State NY Zip Code 12053

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2025

FEC Identification Number: C

Transaction ID : BDC3E7DCD

Amount of Each Disbursement this Period: 32.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 61.10

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

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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. KLEKOSKY, PETER, , ,		Date of Disbursement MM / DD / YYYY 04 / 21 / 2025	
Mailing Address 624 SNUG HARBOR DR B3		FEC Identification Number C	
City BOYNTON BEACH	State FL	Zip Code 33435	Transaction ID : B29C48FD2A
Purpose of Disbursement REFUND OF CONTRIBUTION		010	Amount of Each Disbursement this Period 329.94
Candidate Name		Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. KLEKOSKY, PETER, , ,		Date of Disbursement MM / DD / YYYY 04 / 21 / 2025	
Mailing Address 624 SNUG HARBOR DR B3		FEC Identification Number C	
City BOYNTON BEACH	State FL	Zip Code 33435	Transaction ID : B7A3380496F
Purpose of Disbursement REFUND OF CONTRIBUTION		010	Amount of Each Disbursement this Period 273.54
Candidate Name		Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. LEE, PETER, , ,		Date of Disbursement MM / DD / YYYY 03 / 31 / 2025	
Mailing Address 1743 MOTOR AVE, , FALSE		FEC Identification Number C	
City KINGMAN	State AZ	Zip Code 86401	Transaction ID : B382E142BA
Purpose of Disbursement REFUND OF CONTRIBUTION		010	Amount of Each Disbursement this Period 32.90
Candidate Name		Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	636.38
TOTAL This Period (last page this line number only).....▶	

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. MACFADYEN, CARYN, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 8700 MORAN ROAD

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement REFUND OF CONTRIBUTION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 21 / 2025

FEC Identification Number: C
Transaction ID : BDB7A28312
Amount of Each Disbursement this Period: 23.50

Memo Item

B. MACFADYEN, CARYN, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 8700 MORAN ROAD

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement REFUND OF CONTRIBUTION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 21 / 2025

FEC Identification Number: C
Transaction ID : BAD5D5929B
Amount of Each Disbursement this Period: 23.50

Memo Item

C. MATEER, RAYMOND, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 1278 MATEER ROAD

City KITTANNING State PA Zip Code 16201

Purpose of Disbursement REFUND OF CONTRIBUTION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 27 / 2025

FEC Identification Number: C
Transaction ID : B608647A93I
Amount of Each Disbursement this Period: 9.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 56.40

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

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. MATLOCK, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7255 W QUINCY AVE UNIT1328 LAKEWOO

City LAKEWOOD State CO Zip Code 80235

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B39BFCE65C

Amount of Each Disbursement this Period: 27.26

Memo Item

B. MCBANE, JEANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8804 HEALY CIRCLE

City WILMINGTON State NC Zip Code 28412

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B151B5F9CC

Amount of Each Disbursement this Period: 27.26

Memo Item

C. MCBANE, JEANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8804 HEALY CIRCLE

City WILMINGTON State NC Zip Code 28412

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B2C2BFDE11

Amount of Each Disbursement this Period: 27.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 81.78

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. MCBANE, JEANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8804 HEALY CIRCLE

City WILMINGTON State NC Zip Code 28412

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2025

FEC Identification Number: C

Transaction ID : BE5C77438F

Amount of Each Disbursement this Period: 27.26

Memo Item

B. MCFADDEN, WILLIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 101 HOLLINGSWORTH COURT

City YORKTOWN State VA Zip Code 23693

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 23 / 2025

FEC Identification Number: C

Transaction ID : BA20B8C3A6

Amount of Each Disbursement this Period: 4.70

Memo Item

C. MCLEOD, CHARLOTTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1105 CLARA AVE.

City PANAMA CITY BEACH State FL Zip Code 32407

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2025

FEC Identification Number: C

Transaction ID : B71A632554

Amount of Each Disbursement this Period: 4.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 36.66

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. MCLEOD, CHARLOTTE, , ,		Date of Disbursement MM / DD / YYYY 03 / 03 / 2025	
Mailing Address 1105 CLARA AVE.		FEC Identification Number C [REDACTED] Transaction ID : BD5954EE04! Amount of Each Disbursement this Period [REDACTED] 4.70	
City PANAMA CITY BEACH	State FL	Zip Code 32407	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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: _____		
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. MCLEOD, CHARLOTTE, , ,		Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 1105 CLARA AVE.		FEC Identification Number C [REDACTED] Transaction ID : B6208F9AF94 Amount of Each Disbursement this Period [REDACTED] 9.40	
City PANAMA CITY BEACH	State FL	Zip Code 32407	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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: _____		
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. MCLEOD, CHARLOTTE, , ,		Date of Disbursement MM / DD / YYYY 05 / 05 / 2025	
Mailing Address 1105 CLARA AVE.		FEC Identification Number C [REDACTED] Transaction ID : B70F666B61 Amount of Each Disbursement this Period [REDACTED] 37.60	
City PANAMA CITY BEACH	State FL	Zip Code 32407	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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: _____		
<input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 51.70
TOTAL This Period (last page this line number only).....▶	[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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
HOUSE CONSERVATIVES FUND

A. MCOMBER, DEBBIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2375 COURTNEY DR

City COLORADO SPRINGS State CO Zip Code 80919

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2025

FEC Identification Number: C

Transaction ID : B00EF3266F

Amount of Each Disbursement this Period: 4.70

Memo Item

B. MILLER, KEITH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 58 SHELLRING RD.

City HILTON HEAD ISLAND State SC Zip Code 29928

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2025

FEC Identification Number: C

Transaction ID : BCDA2BCCC

Amount of Each Disbursement this Period: 0.94

Memo Item

C. MILLER, LYNN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1100 PALOMA DRIVE

City GREENSBORO State GA Zip Code 30642

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2025

FEC Identification Number: C

Transaction ID : BCEB3332C

Amount of Each Disbursement this Period: 27.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 32.90

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

**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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
HOUSE CONSERVATIVES FUND

A. MONCUSE, R. J., , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 6

City **BURLESON** State **TX** Zip Code **76097**

Purpose of Disbursement **REFUND OF CONTRIBUTION** Category/Type **010**

Candidate Name

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

State: District:

Date of Disbursement: **06 / 02 / 2025**

FEC Identification Number: **C**

Transaction ID : B2E53E7634f

Amount of Each Disbursement this Period: **14.10**

Memo Item

B. MURPHY, DANNY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6010 SULFUR SPRING DRIVE

City **KILLEEN** State **TX** Zip Code **76542**

Purpose of Disbursement **REFUND OF CONTRIBUTION** Category/Type **010**

Candidate Name

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

State: District:

Date of Disbursement: **03 / 17 / 2025**

FEC Identification Number: **C**

Transaction ID : BEAD8D18A7

Amount of Each Disbursement this Period: **0.94**

Memo Item

C. NAPIER, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9680 SAN BERNARDINO NE

City **ALBUQUERQUE** State **NM** Zip Code **87122**

Purpose of Disbursement **REFUND OF CONTRIBUTION** Category/Type **010**

Candidate Name

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

State: District:

Date of Disbursement: **05 / 12 / 2025**

FEC Identification Number: **C**

Transaction ID : B50784BACE

Amount of Each Disbursement this Period: **0.94**

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **15.98**

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. NAPIER, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9680 SAN BERNARDINO NE

City ALBUQUERQUE State NM Zip Code 87122

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 12 / 2025

FEC Identification Number: C

Transaction ID : **BAFA07B15C**

Amount of Each Disbursement this Period: 0.94

Memo Item

B. NAPIER, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9680 SAN BERNARDINO NE

City ALBUQUERQUE State NM Zip Code 87122

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 12 / 2025

FEC Identification Number: C

Transaction ID : **B4A53BDE6B**

Amount of Each Disbursement this Period: 0.94

Memo Item

C. OTTO, CHARLAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 206 LINCOLN AVENUE

City BANGOR State MI Zip Code 49013

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 28 / 2025

FEC Identification Number: C

Transaction ID : **B7E59ACAB**

Amount of Each Disbursement this Period: 0.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2.82

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

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. PACKER, BOBBIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 307 W POINT ST

City ROANOKE State AL Zip Code 36274

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2025

FEC Identification Number: C

Transaction ID : B232E92604E

Amount of Each Disbursement this Period: 27.26

Memo Item

B. PADGETT, DANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 249 RAUSCHER CT

City ELYRIA State OH Zip Code 44035

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2025

FEC Identification Number: C

Transaction ID : B8A2A928CE

Amount of Each Disbursement this Period: 4.70

Memo Item

C. PEMBERTON, JEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6019 HENRY HAMLET DR

City CONROE State TX Zip Code 77304

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2025

FEC Identification Number: C

Transaction ID : B773A2B7BF

Amount of Each Disbursement this Period: 23.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.46

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

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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. PEMBERTON, JEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6019 HENRY HAMLET DR

City CONROE State TX Zip Code 77304

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2025

FEC Identification Number: C

Transaction ID : B534EEB579

Amount of Each Disbursement this Period: 23.50

Memo Item

B. PHILLIPS, CAROL NORMA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11349 ALAMO RANCH PARKWAY

City SAN ANTONIO State TX Zip Code 78253

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2025

FEC Identification Number: C

Transaction ID : B7FADCA3D

Amount of Each Disbursement this Period: 14.10

Memo Item

C. POTZERNITZ, EMERY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11340 HOBACK JCT SR

City JACKSON State WY Zip Code 83001

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 24 / 2025

FEC Identification Number: C

Transaction ID : B8ED9FB48

Amount of Each Disbursement this Period: 274.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 312.08

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. RAASCH, ARTHUR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2404 SPRINGWOOD LN

City RICHARDSON State TX Zip Code 75082

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 27 / 2025

FEC Identification Number: C

Transaction ID : B9B50C7252!

Amount of Each Disbursement this Period: 0.94

Memo Item

B. RAASCH, ARTHUR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2404 SPRINGWOOD LN

City RICHARDSON State TX Zip Code 75082

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 27 / 2025

FEC Identification Number: C

Transaction ID : B75F5469EC1

Amount of Each Disbursement this Period: 0.94

Memo Item

C. RAASCH, ARTHUR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2404 SPRINGWOOD LN

City RICHARDSON State TX Zip Code 75082

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 27 / 2025

FEC Identification Number: C

Transaction ID : B073C1F5AE

Amount of Each Disbursement this Period: 0.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2.82

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. ROTH, RONAL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 861 ROCK RUN RD

City POTTSTOWN State PA Zip Code 19465

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2025

FEC Identification Number: C

Transaction ID : B7D9A46F47

Amount of Each Disbursement this Period: 27.26

Memo Item

B. SIMMONS, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 321 SLOSSON ST.

City WEBSTER State TX Zip Code 77598

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 28 / 2025

FEC Identification Number: C

Transaction ID : BF11DBFDCE

Amount of Each Disbursement this Period: 14.10

Memo Item

C. SIMMONS, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 321 SLOSSON ST.

City WEBSTER State TX Zip Code 77598

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 28 / 2025

FEC Identification Number: C

Transaction ID : B535E40B6D

Amount of Each Disbursement this Period: 9.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 50.76

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. SINCLAIR, PATRICIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1739 N. TULARE WAY

City UPLAND State CA Zip Code 91784

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 12 / 2025

FEC Identification Number: C

Transaction ID : B29E5E207C

Amount of Each Disbursement this Period: 9.40

Memo Item

B. SINCLAIR, PATRICIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1739 N. TULARE WAY

City UPLAND State CA Zip Code 91784

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2025

FEC Identification Number: C

Transaction ID : BEE74E3D60

Amount of Each Disbursement this Period: 24.75

Memo Item

C. SINCLAIR, PATRICIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1739 N. TULARE WAY

City UPLAND State CA Zip Code 91784

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2025

FEC Identification Number: C

Transaction ID : B64D64AF7A

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 39.15

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

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. SKLAR, ANNA, , ,		Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 855 LOUISIANA AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BC0E9E0D47	
City BROOKLYN	State NY	Zip Code 11239	Amount of Each Disbursement this Period 23.50
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) B. SKLAR, ANNA, , ,		Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 855 LOUISIANA AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B7F4DC5305I	
City BROOKLYN	State NY	Zip Code 11239	Amount of Each Disbursement this Period 23.50
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) C. SPRINKLE, RAYMOND, , ,		Date of Disbursement MM / DD / YYYY 04 / 14 / 2025	
Mailing Address 8240 PENINSULA LN		FEC Identification Number C [REDACTED] Transaction ID : BD6A25908F	
City SHERRILLS FORD	State NC	Zip Code 28673	Amount of Each Disbursement this Period 23.50
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	70.50
TOTAL This Period (last page this line number only).....▶	

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. SPRINKLE, RAYMOND, , ,		Date of Disbursement MM / DD / YYYY 04 / 14 / 2025	
Mailing Address 8240 PENINSULA LN		FEC Identification Number C [REDACTED] Transaction ID : BEC1AD93D Amount of Each Disbursement this Period 23.50	
City SHERRILLS FORD	State NC	Zip Code 28673	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. STREBECK, JULIA, , ,		Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 5315 COUNTY OAD		FEC Identification Number C [REDACTED] Transaction ID : BFA96621E5 Amount of Each Disbursement this Period 14.10	
City NEVADA	State TX	Zip Code 75173	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. STREINE, JOANNE, , ,		Date of Disbursement MM / DD / YYYY 04 / 14 / 2025	
Mailing Address 1060 BELMONT PARK		FEC Identification Number C [REDACTED] Transaction ID : BE1867EF50 Amount of Each Disbursement this Period 14.10	
City UNION	State KY	Zip Code 41091	Category/ Type 010
Purpose of Disbursement REFUND OF CONTRIBUTION		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:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	51.70
TOTAL This Period (last page this line number only).....▶	

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial) A. SWANSONWILSON, MICHELLE, , ,			Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 14805 SOUTH LOCUST STREET			FEC Identification Number C [REDACTED] Transaction ID : BD77A2C8B2	
City OLATHE	State KS	Zip Code 66062	Amount of Each Disbursement this Period [REDACTED] 0.94	
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>	
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. TARR, ANNE, , ,			Date of Disbursement MM / DD / YYYY 03 / 10 / 2025	
Mailing Address 13306 SOUTHWALK			FEC Identification Number C [REDACTED] Transaction ID : B91D03CC2B	
City SAN ANTONIO	State TX	Zip Code 70232	Amount of Each Disbursement this Period [REDACTED] 14.10	
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>	
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. THOMPSON, SALLY, , ,			Date of Disbursement MM / DD / YYYY 04 / 21 / 2025	
Mailing Address 2963 MASTERS COURT SOUTH			FEC Identification Number C [REDACTED] Transaction ID : BEA17D078E	
City BURLESON	State TX	Zip Code 76028	Amount of Each Disbursement this Period [REDACTED] 27.26	
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>	
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).....▶	[REDACTED] 42.30
TOTAL This Period (last page this line number only).....▶	[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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. THOMPSON, SALLY, , ,

Mailing Address 2963 MASTERS COURT SOUTH

City
BURLESON

State
TX

Zip Code
76028

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2025

FEC Identification Number

C [REDACTED]

Transaction ID : BA0D85B08D

Amount of Each Disbursement this Period

[REDACTED] 27.26

Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON, SALLY, , ,

Mailing Address 2963 MASTERS COURT SOUTH

City
BURLESON

State
TX

Zip Code
76028

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2025

FEC Identification Number

C [REDACTED]

Transaction ID : BD65E4F3DE

Amount of Each Disbursement this Period

[REDACTED] 27.26

Memo Item

Full Name (Last, First, Middle Initial)

C. VASQUES, SUSAN, , ,

Mailing Address 63 OAK ST, NEAR MAIN ST,

City
WAKEFIELD

State
RI

Zip Code
02879

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		07		2025

FEC Identification Number

C [REDACTED]

Transaction ID : B0D7376525

Amount of Each Disbursement this Period

[REDACTED] 0.94

Memo Item

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

[REDACTED] 55.46

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

[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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
HOUSE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

A. VINSON, DEBBIE, , ,

Mailing Address 16800 PINEVIEW CIR

City MABELVALE State AR Zip Code 72103

Purpose of Disbursement
REFUND OF CONTRIBUTION

010
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 10 / 2025

FEC Identification Number
C
Transaction ID : **BB97303265E**
Amount of Each Disbursement this Period
4.70

Memo Item

Full Name (Last, First, Middle Initial)

B. WILKERSON, WALLACE, , ,

Mailing Address 1102 MADELINE ST

City NEW BRAUNFELS State TX Zip Code 78132

Purpose of Disbursement
REFUND OF CONTRIBUTION

010
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2025

FEC Identification Number
C
Transaction ID : **BA8E98E2EE**
Amount of Each Disbursement this Period
4.70

Memo Item

Full Name (Last, First, Middle Initial)

C. WILKERSON, WALLACE, , ,

Mailing Address 1102 MADELINE ST

City NEW BRAUNFELS State TX Zip Code 78132

Purpose of Disbursement
REFUND OF CONTRIBUTION

010
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 31 / 2025

FEC Identification Number
C
Transaction ID : **B9EC7E564E**
Amount of Each Disbursement this Period
4.70

Memo Item

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

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

14.10

**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 checked="" 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)
HOUSE CONSERVATIVES FUND

A. WILLIAMS, ROBERTA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1357 REDWOOD CIRCLE APT 321

City GRANTS PASS State OR Zip Code 97527

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 23 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B1E01E02FA

Amount of Each Disbursement this Period: 4.70

Memo Item

B. ZIEGLER, YVONNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3702 ELLA LEE LANE

City HOUSTON State TX Zip Code 77027

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 27 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B8B35A99D2

Amount of Each Disbursement this Period: 27.26

Memo Item

C. ZIEGLER, YVONNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3702 ELLA LEE LANE

City HOUSTON State TX Zip Code 77027

Purpose of Disbursement REFUND OF CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 27 / 2025

FEC Identification Number: C [REDACTED]

Transaction ID : B5D0A2D4C

Amount of Each Disbursement this Period: 27.26

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	59.22
TOTAL This Period (last page this line number only).....▶	9478.98