

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

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

DR. BRIAN BABIN FOR CONGRESS

ADDRESS (number and street)

PO BOX 159



Check if different than previously reported. (ACC)

WOODVILLE

TX

75979

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00553859

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

STATE ▼ DISTRICT

TX

36

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

Y Y Y Y

2023

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Cleveland, Sue, , Mrs.,

Type or Print Name of Treasurer

Cleveland, Sue, , Mrs.,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

17

Y Y Y Y

2023

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 104

Write or Type Committee Name  
**DR. BRIAN BABIN FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
 01 / 01 / 2023

To:

M M / D D / Y Y Y Y  
 03 / 31 / 2023

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 157814.66               | 162082.50                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 157814.66               | 162082.50                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 106271.22               | 144156.71                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 35.00                              |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 106271.22               | 144121.71                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 885102.83               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                    |

## For further information contact:

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

Toll Free 800-424-9530  
 Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

PAGE 3 / 104

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

DR. BRIAN BABIN FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2023

To:

MM / DD / YYYY  
03 / 31 / 2023**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

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

108825.00

112125.00

(ii) Unitemized .....

4489.66

4957.50

(iii) TOTAL of contributions  
from individuals ▶

113314.66

117082.50

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

44500.00

45000.00

(d) The Candidate .....

0.00

0.00

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

157814.66

162082.50

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

0.00

1097.86

## 13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

35.00

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

0.00

0.00

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

157814.66

163215.36

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 104

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 106271.22                     | 144156.71                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....                                                | 91380.00                      | 93530.00                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 197651.22                     | 237686.71                          |

## **III. CASH SUMMARY**

|                                                                                       |            |
|---------------------------------------------------------------------------------------|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 924939.39  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 157814.66  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 1082754.05 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 197651.22  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 885102.83  |

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3A

Transaction ID :

A credit card payment made late in Q1 was inadvertently omitted from the recently filed Q1 report. This amendment now shows the \$2671.89 payment to Chase Card Services on 3/31/2023 along with the itemized details. The summary totals, including ending cash, is updated.

Form/Schedule:

Transaction ID:

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

PAGE 6 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Anawate, Ricardo, A., Mr.,**

Mailing Address Po Box 12557

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77726 |
|------------------|-------------|-------------------|

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

|                                       |                    |
|---------------------------------------|--------------------|
| Name of Employer<br>Optimus Steel LLC | Occupation<br>V.P. |
|---------------------------------------|--------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 20 / 2023          |

Transaction ID : SA15792

Amount of Each Receipt this Period

300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Anderson, Scott, , Mr.,**

Mailing Address 214 Millbrook St

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Houston | State<br>TX | Zip Code<br>77024 |
|-----------------|-------------|-------------------|

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

|                                       |                         |
|---------------------------------------|-------------------------|
| Name of Employer<br>Anderson Oil Ltd. | Occupation<br>Executive |
|---------------------------------------|-------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 20 / 2023          |

Transaction ID : SA15797

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Arnold, Eddie, , ,**

Mailing Address 4655 Ashdown St

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77706 |
|------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>Retired | Occupation<br>Retired |
|-----------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 13 / 2023          |

Transaction ID : SA15819

Amount of Each Receipt this Period

500.00

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

|         |
|---------|
| 1800.00 |
|---------|

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Blake, Bruce, W., Mr.,

Mailing Address PO Box 10105

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Liberty | State<br>TX | Zip Code<br>77575 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                   |                                     |
|-----------------------------------|-------------------------------------|
| Name of Employer<br>Self-Employed | Occupation<br>Oil & Gas Investments |
|-----------------------------------|-------------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 23 / 2023          |

Transaction ID : SA15730

Amount of Each Receipt this Period

2900.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Blake, Christina, , ,

Mailing Address 1704 Cos St

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Liberty | State<br>TX | Zip Code<br>77575 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                                    |                                          |
|----------------------------------------------------|------------------------------------------|
| Name of Employer<br>University Of Texas Health Sci | Occupation<br>Henderson Partners/Rancher |
|----------------------------------------------------|------------------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 23 / 2023          |

Transaction ID : SA15731

Amount of Each Receipt this Period

2900.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Boone, Eugene, V., Dr.,

Mailing Address 1090 N Main St

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Vidor | State<br>TX | Zip Code<br>77662 |
|---------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                   |                       |
|-----------------------------------|-----------------------|
| Name of Employer<br>Self-Employed | Occupation<br>Dentist |
|-----------------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 03 / 2023          |

Transaction ID : SA15755

Amount of Each Receipt this Period

500.00

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

|         |
|---------|
| 6300.00 |
|---------|

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Brittingham, Charles, , ,

A.

Mailing Address 3203 Collard St

City

Alexandria

State

VA

Zip Code

22306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cassidy Associates

Occupation

Government Affairs

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15845

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked by conduit WinRed

Full Name (Last, First, Middle Initial)

WinRed

B.

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

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18174.85

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15883-15845

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
Conduit - see earmark above

Full Name (Last, First, Middle Initial)

C. Doornbos 4, L.P.

C.

Mailing Address PO Box 696

City

Nederland

State

TX

Zip Code

77627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15776

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

1500.00

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

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

|                                                                                                                                                 |             |                                   |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Campo, Richard, , ,                                                                        |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 2930 Lazy Lane Blvd                                                                                                             |             |                                   | Transaction ID : SA15869                                   |  |
| City<br>Houston                                                                                                                                 | State<br>TX | Zip Code<br>77019                 | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>Camden                                                                                                                      |             | Occupation<br>Real Estate         |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>1000.00 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Cleveland, Sue, , ,                                                                        |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 15 / 2023 |  |
| Mailing Address PO Box 30055                                                                                                                    |             |                                   | Transaction ID : SA15816                                   |  |
| City<br>Lumberton                                                                                                                               | State<br>TX | Zip Code<br>77657                 | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>Retired                                                                                                                     |             | Occupation<br>Retired             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>1000.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Crenshaw, Will, B., Mr.,                                                                   |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 23 / 2023 |  |
| Mailing Address PO Box 790                                                                                                                      |             |                                   | Transaction ID : SA15721                                   |  |
| City<br>Beaumont                                                                                                                                | State<br>TX | Zip Code<br>77704                 | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>The Modern Group, Ltd.                                                                                                      |             | Occupation<br>Chairman            |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>2500.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                   | 4500.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                   |                                                            |  |

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

PAGE 10 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
De Leon, Roberto, , Col., Jr.

Mailing Address 402 Bayridge Rd

City

LA Porte

State

TX

Zip Code

77571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lennar

Occupation

Construction Manager

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 0 |   | 2 | 0 | 3 |   |

Transaction ID : SA15798

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
Denson, Paula, L., Dr.,

Mailing Address PO Box 729

City

Woodville

State

TX

Zip Code

75979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tyler County Family Medical Clinic

Occupation

Physician

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 3 |   |

Transaction ID : SA15772

Amount of Each Receipt this Period

300.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
Dishman, George, A., Mr., Jr.

Mailing Address 6820 College St

City

Beaumont

State

TX

Zip Code

77707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 8 |   | 2 | 0 | 3 |   |

Transaction ID : SA15782

Amount of Each Receipt this Period

300.00

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

1100.00

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

PAGE 11 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Domino, Linda, , ,****A.**

Mailing Address 890 Brandywine St

City

Beaumont

State

TX

Zip Code

77706

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

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

**Transaction ID : SA15795**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Doss, Justin, , ,****B.**

Mailing Address 4845 Christina Ln

City

Beaumont

State

TX

Zip Code

77706

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

Name of Employer

Baptist Hospitals of Southeast Texas -

Occupation

CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

**Transaction ID : SA15803**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Edwards, David, , Mr.,****C.**

Mailing Address PO Box 86

City

Stowell

State

TX

Zip Code

77661

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

Name of Employer

Self

Occupation

Farmer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

**Transaction ID : SA15742**

Amount of Each Receipt this Period

500.00

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

3000.00

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

PAGE 12 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ferguson, James, P., Dr.,**

Mailing Address 5670 Inwood Dr

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Houston | State<br>TX | Zip Code<br>77056 |
|-----------------|-------------|-------------------|

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

|                            |                      |
|----------------------------|----------------------|
| Name of Employer Requested | Occupation Requested |
|----------------------------|----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : SA15871

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Flournoy, Charles, H., Mr.,**

Mailing Address 2313 Persa St

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Houston | State<br>TX | Zip Code<br>77019 |
|-----------------|-------------|-------------------|

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

|                                    |                                 |
|------------------------------------|---------------------------------|
| Name of Employer Requested<br>None | Occupation Requested<br>Retired |
|------------------------------------|---------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 03 / 2023          |

Transaction ID : SA15760

Amount of Each Receipt this Period

|         |
|---------|
| 3300.00 |
|---------|

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Fuljenz, Michael, , ,**

Mailing Address 8255 White Rd

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77706 |
|------------------|-------------|-------------------|

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

|                                                          |                                   |
|----------------------------------------------------------|-----------------------------------|
| Name of Employer Requested<br>Universal Coin and Bullion | Occupation Requested<br>President |
|----------------------------------------------------------|-----------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 28 / 2023          |

Transaction ID : SA15808

Amount of Each Receipt this Period

|         |
|---------|
| 2000.00 |
|---------|

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

|         |
|---------|
| 6300.00 |
|---------|

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

PAGE 13 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A.** Furst, Nancy, , Mrs.,

Mailing Address 4302 Allison Rd

City

Houston

State

TX

Zip Code

77048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15794

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Ghenciu, Vlad, , ,

Mailing Address 11455 Tampa Ave Unit 168

City

Porter Ranch

State

CA

Zip Code

91326

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

Attorney

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15864

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked by conduit WinRed

Full Name (Last, First, Middle Initial)

**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

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18174.85

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15883-15864

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit - see earmark above

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

750.00

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

PAGE 14 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Goodson, Guy, , ,**

Mailing Address 1550 Infinity Ln

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GERMER PLLC

Occupation

Attorney

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 13  |   | 2023        |

Transaction ID : SA15821

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Grantham, Larry, , ,**

Mailing Address 6090 Natchez Trce

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sanitary Supply Inc

Occupation

OWNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 02  |   | 2023        |

Transaction ID : SA15807

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Griffith, Carl, R., Hon., Jr.**

Mailing Address 26985 Ih 10

City

Winnie

State

TX

Zip Code

77665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GMJ

Occupation

President/CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 24  |   | 2023        |

Transaction ID : SA15823

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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

PAGE 15 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Guidry, Andrew, , ,**

Mailing Address 6526 Truxton Ln

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77706 |
|------------------|-------------|-------------------|

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

|                                   |                            |
|-----------------------------------|----------------------------|
| Name of Employer<br>Sabine Pilots | Occupation<br>marine Pilot |
|-----------------------------------|----------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 30 / 2023          |

Transaction ID : SA15870

Amount of Each Receipt this Period

|         |
|---------|
| 2500.00 |
|---------|

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Guthrie, Pamela, A., Ms.,**

Mailing Address 5010 Rachelle Ridge Ct

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Pasadena | State<br>TX | Zip Code<br>77505 |
|------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>Retired | Occupation<br>Retired |
|-----------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 24 / 2023          |

Transaction ID : SA15825

Amount of Each Receipt this Period

|       |
|-------|
| 25.00 |
|-------|

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Hall, Darrell, , Mr.,**

Mailing Address 6580 Capitol St

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Groves | State<br>TX | Zip Code<br>77619 |
|----------------|-------------|-------------------|

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

|                             |                  |
|-----------------------------|------------------|
| Name of Employer<br>Caliche | Occupation<br>VP |
|-----------------------------|------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 20 / 2023          |

Transaction ID : SA15793

Amount of Each Receipt this Period

|        |
|--------|
| 500.00 |
|--------|

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

|         |
|---------|
| 3025.00 |
|---------|

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

PAGE 16 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Hance, Kent, R., The Honora,****A.**

Mailing Address PO Box 4226

City

Lubbock

State

TX

Zip Code

79409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hance Scarborough

Occupation

Attorney

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 3 |   |   | 1 | 4 |   | 2 | 0 | 2 | 3 |   |   |

Transaction ID : SA15781

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Harrington, Michele, , ,****B.**

Mailing Address 3550 Whittaker Ln

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self

Occupation

dance school owner

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 3 |   |   | 1 | 1 |   | 2 | 0 | 2 | 3 |   |   |

Transaction ID : SA15802

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Hayes, Jim, , ,****C.**

Mailing Address PO Box 22858

City

Beaumont

State

TX

Zip Code

77720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

Developer

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 3 |   |   | 1 | 4 |   | 2 | 0 | 2 | 3 |   |   |

Transaction ID : SA15817

Amount of Each Receipt this Period

2000.00

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

5000.00

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

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

PAGE 17 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Henderson, Elaine, , ,

Mailing Address 6260 Regina Ln

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UCB

Occupation

Partner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15815

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Henderson, John, A., Dr., IV

Mailing Address 7811 Pecan Dr

City

Beaumont

State

TX

Zip Code

77713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Texas Urology

Occupation

Physician

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15716

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hill, Kenneth, , ,

Mailing Address 3409 Winter Ln

City

Baytown

State

TX

Zip Code

77521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15834

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked by conduit WinRed

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

1250.00

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

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

PAGE 18 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WinRed****A.**

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

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18174.85

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15883-15834

Amount of Each Receipt this Period

250.00

☒ Memo Item  
Conduit - see earmark above

Full Name (Last, First, Middle Initial)

**Hood, Roy, , ,****B.**

Mailing Address 123 Cedar Ln

City

Seabrook

State

TX

Zip Code

77586

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

Name of Employer

Occupation

Retired

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15809

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Hopkins, Newton, , ,****C.**

Mailing Address Po Box 1166

City

Houston

State

TX

Zip Code

77251

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

Name of Employer

Occupation

O'Rourke Petroleum

N/A

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15820

Amount of Each Receipt this Period

1000.00

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

1500.00

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

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

PAGE 19 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Hughes, Benny, H., Mr.,**

Mailing Address 1340 Thomas Rd

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15719

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jenkins, John, W., Mr.,**

Mailing Address 3202 Fm 1663 Rd

City

Hankamer

State

TX

Zip Code

77560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Farmer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15790

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Johnson, John, , ,**

Mailing Address 202 Stratton Ln

City

Beaumont

State

TX

Zip Code

77707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Griffith Moseley Johnson

Occupation

Attorney

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15805

Amount of Each Receipt this Period

1000.00

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

1800.00

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

|                                                                                                                                                 |             |                                   |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Kumar, Saku, , Dr.,                                                                        |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 20 / 2023 |  |
| Mailing Address 4810 Christina Ln                                                                                                               |             |                                   | Transaction ID : SA15814                                   |  |
| City<br>Beaumont                                                                                                                                | State<br>TX | Zip Code<br>77706                 | Amount of Each Receipt this Period<br>300.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>Environmental Consultant                                                                                                    |             | Occupation<br>Self- Employed      |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>300.00  |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Lauzon, Peter, A., Mr.,                                                                    |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 23 / 2023 |  |
| Mailing Address 15219 Poplar Springs Ln                                                                                                         |             |                                   | Transaction ID : SA15739                                   |  |
| City<br>Houston                                                                                                                                 | State<br>TX | Zip Code<br>77062                 | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>PPI LLC                                                                                                                     |             | Occupation<br>Engineer            |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>1000.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Libby, J., Douglass, Mr.,                                                                  |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 17 / 2023 |  |
| Mailing Address 2169 County Road 2790                                                                                                           |             |                                   | Transaction ID : SA15712                                   |  |
| City<br>Woodville                                                                                                                               | State<br>TX | Zip Code<br>75979                 | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>Retired                                                                                                                     |             | Occupation<br>Retired             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>500.00  |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                   | 1800.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                   |                                                            |  |

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

PAGE 21 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>Mason, Bruce, , Mr.,</b>                                                                |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 23 / 2023 |  |
| Mailing Address 4542 S Pine Island Rd                                                                                                           |             |                                     | Transaction ID : SA15720                                   |  |
| City<br>Beaumont                                                                                                                                | State<br>TX | Zip Code<br>77713                   | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer<br>Mason Construction                                                                                                          |             | Occupation<br>Contractor            |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>500.00  |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>Mathews, Alison, , Mrs.,</b>                                                            |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 09 / 2023 |  |
| Mailing Address Po Box 670                                                                                                                      |             |                                     | Transaction ID : SA15767                                   |  |
| City<br>Jasper                                                                                                                                  | State<br>TX | Zip Code<br>75951                   | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer<br>Information Requested                                                                                                       |             | Occupation<br>Information Requested |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>McDaniel, Wayne, , ,</b>                                                                |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 03 / 2023 |  |
| Mailing Address Po Box 3364                                                                                                                     |             |                                     | Transaction ID : SA15747                                   |  |
| City<br>Conroe                                                                                                                                  | State<br>TX | Zip Code<br>77305                   | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer<br>Information Requested                                                                                                       |             | Occupation<br>Information Requested |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                     | 2500.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                     |                                                            |  |

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

PAGE 22 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
McKim, J.A., , Mr., III

Mailing Address PO Box 2304

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Kountze | State<br>TX | Zip Code<br>77625 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>Retired | Occupation<br>Retired |
|-----------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 23 / 2023          |

Transaction ID : SA15724

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
McWilliams, Andrea, , ,

Mailing Address 12 Niles Rd

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Austin | State<br>TX | Zip Code<br>78703 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                         |                          |
|-------------------------|--------------------------|
| Name of Employer<br>MGA | Occupation<br>Consultant |
|-------------------------|--------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 02 / 2023          |

Transaction ID : SA15842

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked by conduit WinRed

**C.** Full Name (Last, First, Middle Initial)  
WinRed

Mailing Address PO Box 9891

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Arlington | State<br>VA | Zip Code<br>22219 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C C00694323

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
18174.85

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : SA15883-15842

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
Conduit - see earmark above**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

|         |
|---------|
| 1250.00 |
|---------|

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Moore, Mark, M., Mr.,**

Mailing Address PO Box 671

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Woodville | State<br>TX | Zip Code<br>75979 |
|-------------------|-------------|-------------------|

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

|                                                      |                       |
|------------------------------------------------------|-----------------------|
| Name of Employer<br>Self - Cypress Creek Cattle, Inc | Occupation<br>Rancher |
|------------------------------------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 09 / 2023          |

Transaction ID : SA15765

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Morris, Mary, , Mrs.,**

Mailing Address 1341 N Meeker Rd

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77713 |
|------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>retired | Occupation<br>retired |
|-----------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 20 / 2023          |

Transaction ID : SA15785

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Moseley, Danny, , Mr.,**

Mailing Address 296 Fern

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Livingston | State<br>TX | Zip Code<br>77351 |
|--------------------|-------------|-------------------|

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

|                                          |                     |
|------------------------------------------|---------------------|
| Name of Employer<br>Moseley Construction | Occupation<br>Owner |
|------------------------------------------|---------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 09 / 2023          |

Transaction ID : SA15768

Amount of Each Receipt this Period

500.00

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

|         |
|---------|
| 1250.00 |
|---------|

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Munro Properties, LLC (partnership)**

Mailing Address 399 N Mlk Pkwy

City

Beaumont

State

TX

Zip Code

77701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 09  |   | 2023    |

Transaction ID : SA15773

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Munro, Bill, , Mr.,**

Mailing Address 6820 Windsor Pkwy

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Munro Properties, LLC

Owner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 09  |   | 2023    |

Transaction ID : SA15774

Amount of Each Receipt this Period

500.00

☒ Memo Item  
Partner @ Munro Properties

Full Name (Last, First, Middle Initial)

**C. Munro, Kelly, , Mrs.,**

Mailing Address 399 N Mlk Pkwy

City

Beaumont

State

TX

Zip Code

77701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Munro Properties, LLC (partnership)

Real Estate

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 09  |   | 2023    |

Transaction ID : SA15775

Amount of Each Receipt this Period

500.00

☒ Memo Item  
Partner @ Monroe Properties**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A.** Ogletree, Ben, , Mr., Jr.

Mailing Address PO Box 1277

City

Livingston

State

TX

Zip Code

77351

FEC ID number of contributing  
federal political committee.

C

Name of Employer

First State Bank

Occupation

Bank CEO

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 20 2023

Transaction ID : SA15801

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Ortega, Rafael, , Mr.,

Mailing Address 1018 Brannon Park Ln

City

Spring

State

TX

Zip Code

77373

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Aurora Technical Services, LLC

Occupation

President

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 20 2023

Transaction ID : SA15705

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Ortega, Rafael, , Mr.,

Mailing Address 1018 Brannon Park Ln

City

Spring

State

TX

Zip Code

77373

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Aurora Technical Services, LLC

Occupation

President

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2023

Transaction ID : SA15706

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

|                                                                                                                                                 |             |                                             |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Palmer, Cynthia, P., Mrs.,                                                                 |             |                                             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 03 / 2023 |  |
| Mailing Address 18423 Point Lookout Dr                                                                                                          |             |                                             | Transaction ID : SA15757                                   |  |
| City<br>Houston                                                                                                                                 | State<br>TX | Zip Code<br>77058                           | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                   |                                                            |  |
| Name of Employer<br>Retired                                                                                                                     |             | Occupation<br>Retired                       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>500.00            |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Ray, Lisa, , ,                                                                             |             |                                             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 14 / 2023 |  |
| Mailing Address 6355 Westgate Dr                                                                                                                |             |                                             | Transaction ID : SA15818                                   |  |
| City<br>Beaumont                                                                                                                                | State<br>TX | Zip Code<br>77706                           | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                   |                                                            |  |
| Name of Employer<br>Self                                                                                                                        |             | Occupation<br>Petroleum Landman/Real Estate |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>500.00            |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Reese, Randall, , ,                                                                        |             |                                             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 20 / 2023 |  |
| Mailing Address 29 Bellchase Gardens Dr                                                                                                         |             |                                             | Transaction ID : SA15813                                   |  |
| City<br>Beaumont                                                                                                                                | State<br>TX | Zip Code<br>77706                           | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                   |                                                            |  |
| Name of Employer<br>Sabine Neches Navigation District                                                                                           |             | Occupation<br>CEO                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>2000.00           |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                             | 2000.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                             |                                                            |  |

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A.** Reese, Randall, Y., Mr.,

Mailing Address 29 Bellchase Gardens Dr

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sabine Neches Navigation District

Occupation

CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15799

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Ruddy, Carolyn, C., Mrs.,

Mailing Address 650 Sue Ln

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SETCA

Occupation

CPA

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15827

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Russell, John, Emerson, Mr.,

Mailing Address 6126 Sugar Hill Dr

City

Houston

State

TX

Zip Code

77057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15740

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ryerkerk, Lori, J., ,

Mailing Address 26985 Ih 10

City

Winnie

State

TX

Zip Code

77665

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Celanese CorporationOccupation  
CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2023

Transaction ID : SA15826

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. S White Farms

Mailing Address Po Box 36

City

Stowell

State

TX

Zip Code

77661

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 03 2023

Transaction ID : SA15744

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. White, Sheri, , ,

Mailing Address PO Box 36

City

Stowell

State

TX

Zip Code

77661

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

S. White Farms

Farmer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 03 2023

Transaction ID : SA15745

Amount of Each Receipt this Period

250.00

☒ Memo Item  
Partner at S White Farms

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

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

1500.00

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

PAGE 29 OF 104

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**White, Steven, K., Mr.,**

Mailing Address PO Box 36

City

Stowell

State

TX

Zip Code

77661

FEC ID number of contributing  
federal political committee.

C

Name of Employer

S. White Farms

Occupation

Farmer

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15746

Amount of Each Receipt this Period

250.00

☒

Memo Item

Partner at S White Farms

Full Name (Last, First, Middle Initial)

**Schnautz, Danny, , ,**

Mailing Address PO Box 5808

City

Pasadena

State

TX

Zip Code

77508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Clark

Occupation

Manager

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

604.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15841

Amount of Each Receipt this Period

500.00

☐

Memo Item

Earmarked by conduit WinRed

Full Name (Last, First, Middle Initial)

**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

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

18174.85

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15883-15841

Amount of Each Receipt this Period

500.00

☒

Memo Item

Conduit - see earmark above

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

500.00

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

|                                                                                                                                                 |             |                                   |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>Scott, Gay, , Ms.,</b>                                                                  |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 140 Grand Chase Dr                                                                                                              |             |                                   | Transaction ID : SA15893                                   |  |
| City<br>Nederland                                                                                                                               | State<br>TX | Zip Code<br>77627                 | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>Trans Global Solutions                                                                                                      |             | Occupation<br>Board of directors  |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>3300.00 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>Scott, James, M., Mr.,</b>                                                              |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 26490 Fm 365 Rd                                                                                                                 |             |                                   | Transaction ID : SA15892                                   |  |
| City<br>Beaumont                                                                                                                                | State<br>TX | Zip Code<br>77705                 | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>Trans Global Solutions, INC.                                                                                                |             | Occupation<br>Business Owner      |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>3300.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>Scott, Jamie, R., Mrs.,</b>                                                             |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 26490 Fm 365 Rd                                                                                                                 |             |                                   | Transaction ID : SA15891                                   |  |
| City<br>Beaumont                                                                                                                                | State<br>TX | Zip Code<br>77705                 | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>Self-Employed                                                                                                               |             | Occupation<br>Business Owner      |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>3300.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                   | 9900.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                   |                                                            |  |

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Scott, Lindsey, , ,****A.**

Mailing Address 1735 W Cardinal Dr

City

Beaumont

State

TX

Zip Code

77705

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
SelfOccupation  
Attorney

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

**Transaction ID : SA15896**

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Scott, Richard, Thomas, Mr.,****B.**

Mailing Address PO Box 1998

City

Nederland

State

TX

Zip Code

77627

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

Name of Employer

Trans-Global Solutions, Inc

Occupation  
Executive

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

**Transaction ID : SA15894**

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Scott, William, F., Mr.,****C.**

Mailing Address 1735 W Cardinal Dr

City

Beaumont

State

TX

Zip Code

77705

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

Name of Employer

Trans-Global Solutions Inc.

Occupation  
Executive

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

**Transaction ID : SA15890**

Amount of Each Receipt this Period

3300.00

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

9900.00

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

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Scott, William, F., , II**

Mailing Address 1735 W Cardinal Dr

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77705 |
|------------------|-------------|-------------------|

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

|                                                |                         |
|------------------------------------------------|-------------------------|
| Name of Employer<br>Trans-Global Solutions Inc | Occupation<br>Executive |
|------------------------------------------------|-------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : SA15895

Amount of Each Receipt this Period

3300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Shaver, Don, S., Mr.,**

Mailing Address 269 Ridgeland St

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77706 |
|------------------|-------------|-------------------|

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

|                                      |                                      |
|--------------------------------------|--------------------------------------|
| Name of Employer<br>BD Advisors, LLC | Occupation<br>Consultant/Investments |
|--------------------------------------|--------------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 03 / 2023          |

Transaction ID : SA15756

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Sherlock, Craig, J., Mr.,**

Mailing Address 795 Goodhue Rd

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77706 |
|------------------|-------------|-------------------|

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

|                                             |                                        |
|---------------------------------------------|----------------------------------------|
| Name of Employer<br>J.S. Edwards & Sherlock | Occupation<br>Lawyer & Insurance Agent |
|---------------------------------------------|----------------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : SA15874

Amount of Each Receipt this Period

300.00

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

|         |
|---------|
| 4600.00 |
|---------|

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

|                                                                                                                                                 |             |                                     |                                                            |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Smith, W., Carroll, Mr.,                                                                   |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 03 / 2023 |  |  |
| Mailing Address 3940 Pasadena Fwy                                                                                                               |             |                                     | Transaction ID : SA15751                                   |  |  |
| City<br>Pasadena                                                                                                                                | State<br>TX | Zip Code<br>77503                   | Amount of Each Receipt this Period<br>2500.00              |  |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item <input type="checkbox"/>  |                                                            |  |  |
| Name of Employer<br>Monument Chevrolet                                                                                                          |             | Occupation<br>Auto Retail           |                                                            |  |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2500.00 |                                                            |  |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Steinhagen, Roy, N., Mr.,                                                                  |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 20 / 2023 |  |  |
| Mailing Address Po Box 20037                                                                                                                    |             |                                     | Transaction ID : SA15800                                   |  |  |
| City<br>Beaumont                                                                                                                                | State<br>TX | Zip Code<br>77720                   | Amount of Each Receipt this Period<br>300.00               |  |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item <input type="checkbox"/>  |                                                            |  |  |
| Name of Employer<br>Steinhagen Oil Co Inc                                                                                                       |             | Occupation<br>Chairman and CEO      |                                                            |  |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>300.00  |                                                            |  |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Sterling, Sandra, , Mrs.,                                                                  |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 03 / 2023 |  |  |
| Mailing Address PO Box 50                                                                                                                       |             |                                     | Transaction ID : SA15759                                   |  |  |
| City<br>Liberty                                                                                                                                 | State<br>TX | Zip Code<br>77575                   | Amount of Each Receipt this Period<br>500.00               |  |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item <input type="checkbox"/>  |                                                            |  |  |
| Name of Employer<br>Retired                                                                                                                     |             | Occupation<br>Retired               |                                                            |  |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>500.00  |                                                            |  |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                     | 3300.00                                                    |  |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                     |                                                            |  |  |

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

|                                                                                                                                                 |             |                                    |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------|------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Trahan, Michael, , ,</b>                                                                       |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 08 / 2023 |  |
| Mailing Address 9527 Havenway Dr                                                                                                                |             |                                    | Transaction ID : SA15810                                   |  |
| City<br>Argyle                                                                                                                                  | State<br>TX | Zip Code<br>76226                  | Amount of Each Receipt this Period<br>100.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                          |                                                            |  |
| Name of Employer<br>retired                                                                                                                     |             | Occupation<br>retired              |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>300.00 |                                                            |  |

|                                                                                                                                                 |             |                                    |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------|------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Trahan, Michael, , ,</b>                                                                       |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 08 / 2023 |  |
| Mailing Address 9527 Havenway Dr                                                                                                                |             |                                    | Transaction ID : SA15804                                   |  |
| City<br>Argyle                                                                                                                                  | State<br>TX | Zip Code<br>76226                  | Amount of Each Receipt this Period<br>100.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                          |                                                            |  |
| Name of Employer<br>retired                                                                                                                     |             | Occupation<br>retired              |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>400.00 |                                                            |  |

|                                                                                                                                                 |             |                                          |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------|------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Tucker, Bradford, , Mr.,</b>                                                                   |             |                                          | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 28 / 2023 |  |
| Mailing Address PO Box 2822                                                                                                                     |             |                                          | Transaction ID : SA15846                                   |  |
| City<br>Houston                                                                                                                                 | State<br>TX | Zip Code<br>77252                        | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>Earmarked by conduit WinRed |                                                            |  |
| Name of Employer<br>Mustang Machinery Company                                                                                                   |             | Occupation<br>Executive                  |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>3300.00      |                                                            |  |

|                                                                   |  |  |         |  |
|-------------------------------------------------------------------|--|--|---------|--|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           |  |  | 3500.00 |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ |  |  |         |  |

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

WinRed

A.

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

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

18174.85

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : SA15883-15846

Amount of Each Receipt this Period

3300.00

☒

Memo Item

Conduit - see earmark above

Full Name (Last, First, Middle Initial)

Tucker, Bradford, , Mr.,

B.

Mailing Address PO Box 2822

City

Houston

State

TX

Zip Code

77252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Mustang Machinery Company

Executive

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 28 2023

Transaction ID : SA15882

Amount of Each Receipt this Period

3300.00

☐

Memo Item

Earmarked by conduit WinRed

Full Name (Last, First, Middle Initial)

WinRed

C.

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

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

18174.85

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : SA15883-15882

Amount of Each Receipt this Period

3300.00

☒

Memo Item

Conduit - see earmark above

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

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

3300.00

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Turk, Juanita, , Mrs.,**

Mailing Address 1008 Pinewood Blvd

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Sour Lake | State<br>TX | Zip Code<br>77659 |
|-------------------|-------------|-------------------|

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

|                                            |                       |
|--------------------------------------------|-----------------------|
| Name of Employer<br>Self - ReMax Northwest | Occupation<br>Realtor |
|--------------------------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 20 / 2023          |

Transaction ID : SA15786

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**West, Martha, , Ms.,**

Mailing Address Po Box 5275

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Jasper | State<br>TX | Zip Code<br>75951 |
|----------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>Retired | Occupation<br>Retired |
|-----------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 07 / 2023          |

Transaction ID : SA15764

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Woody, Tracy, , Mr.,**

Mailing Address 23229 Smithpoint Rd

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Anahuac | State<br>TX | Zip Code<br>77514 |
|-----------------|-------------|-------------------|

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

|                                         |                         |
|-----------------------------------------|-------------------------|
| Name of Employer<br>Jeri's Seafood Inc. | Occupation<br>President |
|-----------------------------------------|-------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : SA15872

Amount of Each Receipt this Period

1000.00

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

|         |
|---------|
| 2500.00 |
|---------|

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Wortham, Karen, , Mrs.,

Mailing Address 1360 Audubon Pl

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Karen &amp; Bob Wortham Charitable Foundat

Occupation

Karen &amp; Bob Wortham Charitable Foundat

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 17 2023

Transaction ID : SA15714

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wortham, Karen, , Mrs.,

Mailing Address 1360 Audubon Pl

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Karen &amp; Bob Wortham Charitable Foundat

Occupation

Karen &amp; Bob Wortham Charitable Foundat

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 03 2023

Transaction ID : SA15749

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wortham, Robert, , Judge,

Mailing Address 1360 Audubon Pl

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jefferson County

Occupation

District Attorney

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 17 2023

Transaction ID : SA15713

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

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

9900.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Wortham, Robert, , Judge,**

Mailing Address 1360 Audubon Pl

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Beaumont | State<br>TX | Zip Code<br>77706 |
|------------------|-------------|-------------------|

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

|                                      |                                 |
|--------------------------------------|---------------------------------|
| Name of Employer<br>Jefferson County | Occupation<br>District Attorney |
|--------------------------------------|---------------------------------|

Receipt For: 2024  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
6600.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 03 / 2023          |

Transaction ID : SA15750

Amount of Each Receipt this Period

3300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Zimmerman, Jason, , ,**

Mailing Address 151 Ranch Creek Dr

|              |             |                   |
|--------------|-------------|-------------------|
| City<br>Azle | State<br>TX | Zip Code<br>76020 |
|--------------|-------------|-------------------|

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

|                          |                                 |
|--------------------------|---------------------------------|
| Name of Employer<br>Self | Occupation<br>Pediatric Dentist |
|--------------------------|---------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 21 / 2023          |

Transaction ID : SA15812

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

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

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

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

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
|-------------------------|

Amount of Each Receipt this Period

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

|           |
|-----------|
| 4300.00   |
| 108825.00 |

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

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ACSPA-Surgeons PAC**

Mailing Address 20 F St NW Ste 1000

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00382424

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15881

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Academy of Ophthalmology Inc PAC (OPHTHPAC)**

Mailing Address 655 Beach St

City

San Francisco

State

CA

Zip Code

94109

FEC ID number of contributing  
federal political committee.**C** C00196246

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15878

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. American Association of Orthodontists PAC (AAOPAC)**

Mailing Address 401 N Lindbergh Blvd

City

Saint Louis

State

MO

Zip Code

63141

FEC ID number of contributing  
federal political committee.**C** C00293910

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15783

Amount of Each Receipt this Period

5000.00

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

7000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. American Association of Orthopaedic Surgeons PAC of AAOS**

Mailing Address 317 Massachusetts Ave NE

City

Washington

State

DC

Zip Code

20002

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

C00343137

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2023D D / Y Y Y Y Y  
31 / 2023Y Y Y Y Y  
2023

Transaction ID : SA15879

Amount of Each Receipt this Period

2500.00

☐

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Dental Association PAC**

Mailing Address 1111 14th St NW Ste 1100

City

Washington

State

DC

Zip Code

20005

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

C00000729

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 31 / 2023D D / Y Y Y Y Y  
31 / 2023Y Y Y Y Y  
2023

Transaction ID : SA15709

Amount of Each Receipt this Period

5000.00

☐

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Osteopathic Information Association Osteopathic PAC**

Mailing Address 1090 Vermont Ave NW Ste 500

City

Washington

State

DC

Zip Code

20005

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

C00113803

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2023D D / Y Y Y Y Y  
31 / 2023Y Y Y Y Y  
2023

Transaction ID : SA15889

Amount of Each Receipt this Period

1000.00

☐

Memo Item

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

8500.00

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

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

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. American Society of Anesthesiologists (ASAPAC)**

Mailing Address 1061 American Ln

City

Schaumburg

State

IL

Zip Code

60173

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

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15899

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anheuser-Busch PAC**

Mailing Address 1 Busch Pl # 202-7

City

Saint Louis

State

MO

Zip Code

63118

FEC ID number of contributing  
federal political committee.**C** C00034488

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15907

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Celanese Corp PAC**

Mailing Address 222 W Las Colinas Blvd

City

Irving

State

TX

Zip Code

75039

FEC ID number of contributing  
federal political committee.**C** C00084871

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15822

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 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Cheniere Energy Inc. PAC**

Mailing Address 701 8th St NW Ste 500

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00430157

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15880

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CHS INC. POLITICAL ACTION COMMITTEE**

Mailing Address 5500 Cenex Dr

City

Inver Grove Heights

State

MN

Zip Code

55077

FEC ID number of contributing  
federal political committee.**C** C00149104

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15898

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CRH AMERICAS, INC. PAC**

Mailing Address 800 Maine Ave SW Ste 800

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing  
federal political committee.**C** C00346353

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15875

Amount of Each Receipt this Period

500.00

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

4000.00

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

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

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Lockheed Martin Employees' PAC**

Mailing Address 2121 Crystal Dr Ste 100

City

Arlington

State

VA

Zip Code

22202

FEC ID number of contributing  
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15904

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**National Emergency Medicine PAC (NEMPAC)**

Mailing Address PO Box 619911

City

Dallas

State

TX

Zip Code

75261

FEC ID number of contributing  
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15885

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Raytheon Company PAC**

Mailing Address 1000 Wilson Blvd Ste 2300

City

Arlington

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.**C** C00097568

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : SA15897

Amount of Each Receipt this Period

2500.00

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

5000.00

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

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

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**DR. BRIAN BABIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ROCKET LAB USA, INC. POLITICAL ACTION COMMITTEE (ROCKET LAB PAC)****A.**

Mailing Address 3881 McGowen St

City

Long Beach

State

CA

Zip Code

90808

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

C00811034

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : SA15888

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**Science Applications International Corporation Voluntary PAC**

Mailing Address 151 Lafayette Dr

City

Oak Ridge

State

TN

Zip Code

37830

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

C00300418

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : SA15884

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**The Boeing Company PAC**

Mailing Address 929 Long Bridge Dr

City

Arlington

State

VA

Zip Code

22202

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

C00142711

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : SA15905

Amount of Each Receipt this Period

1000.00

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

4500.00

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

PAGE 45 OF 104

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>The Boeing Company PAC                                                                     |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 929 Long Bridge Dr                                                                                                              |             |                                     | Transaction ID : SA15906                                   |  |
| City<br>Arlington                                                                                                                               | State<br>VA | Zip Code<br>22202                   | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00142711                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2000.00 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>The Continuum Fund of Zachry Holdings, Inc. PAC                                            |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 527 Logwood Ave                                                                                                                 |             |                                     | Transaction ID : SA15876                                   |  |
| City<br>San Antonio                                                                                                                             | State<br>TX | Zip Code<br>78221                   | Amount of Each Receipt this Period<br>3000.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00471565                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>3000.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>The Dow Chemical Company                                                                   |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 2030 Dow Ctr                                                                                                                    |             |                                     | Transaction ID : SA15877                                   |  |
| City<br>Midland                                                                                                                                 | State<br>MI | Zip Code<br>48674                   | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00074096                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                     | 5000.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                     |                                                            |  |

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

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
USA Rice Federation PAC

Mailing Address 2101 Wilson Blvd Ste 610

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Arlington | State<br>VA | Zip Code<br>22201 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00308478

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  |   | 27  |   | 2023        |

Transaction ID : SA15741

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Virgin Orbit, LLC Political Action Committee

Mailing Address 4022 E Conant St

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Long Beach | State<br>CA | Zip Code<br>90808 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00788976

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 20  |   | 2023        |

Transaction ID : SA15784

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

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

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

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

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
|-----|---|-----|---|-------------|

Amount of Each Receipt this Period

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

3500.00

44500.00

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

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|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 1340 Poydras St Ste 1770

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 08  |   | 2023    |

City  
New OrleansState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.00

Transaction ID : SB5475

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 1340 Poydras St Ste 1770

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 11  |   | 2023    |

City  
New OrleansState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

78.30

Transaction ID : SB5469

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 1340 Poydras St Ste 1770

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 13  |   | 2023    |

City  
New OrleansState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

78.90

Transaction ID : SB5466

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

181.20

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

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

PAGE 48 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 1340 Poydras St Ste 1770

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 15  |   | 2023    |

City  
New OrleansState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

137.40

Transaction ID : SB5459

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 1340 Poydras St Ste 1770

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 17  |   | 2023    |

City  
New OrleansState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.80

Transaction ID : SB5452

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 1340 Poydras St Ste 1770

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 21  |   | 2023    |

City  
New OrleansState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

90.60

Transaction ID : SB5443

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

247.80

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

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

PAGE 49 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 1340 Poydras St Ste 1770

City  
New OrleansState  
LAZip Code  
70112Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

137.10

Transaction ID : SB5420

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Babin, Brian, , Dr.,**

Mailing Address PO Box 279

City  
WoodvilleState  
TXZip Code  
75979Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Babin, Brian, , Dr.,

Office Sought:

|                                     |           |
|-------------------------------------|-----------|
| <input checked="" type="checkbox"/> | House     |
| <input type="checkbox"/>            | Senate    |
| <input type="checkbox"/>            | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State: TX

District: 36

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C H6TX02079

Amount of Each Disbursement this Period

544.96

Transaction ID : SB5541

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Babin, Brian, , Dr.,**

Mailing Address PO Box 279

City  
WoodvilleState  
TXZip Code  
75979Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Babin, Brian, , Dr.,

Office Sought:

|                                     |           |
|-------------------------------------|-----------|
| <input checked="" type="checkbox"/> | House     |
| <input type="checkbox"/>            | Senate    |
| <input type="checkbox"/>            | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State: TX

District: 36

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C H6TX02079

Amount of Each Disbursement this Period

238.42

Transaction ID : SB5479

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

920.48

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

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

PAGE 50 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Babin, Brian, , Dr.,**

Mailing Address PO Box 279

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
WoodvilleState  
TXZip Code  
75979

FEC Identification Number

**C** H6TX02079Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Babin, Brian, , Dr.,

Category/  
Type

Amount of Each Disbursement this Period

185.37

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5418

☐ Memo Item

State: TX

District: 36

Full Name (Last, First, Middle Initial)

**B. Babin, Roxanne, , ,**

Mailing Address PO Box 279

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 06  |   | 2023    |

City  
WoodvilleState  
TXZip Code  
75979

FEC Identification Number

**C**Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

119.21

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5480

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. Babin, Roxanne, , ,**

Mailing Address PO Box 279

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
WoodvilleState  
TXZip Code  
75979

FEC Identification Number

**C**Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

155.24

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5419

☐ Memo Item

State:

District:

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

459.82

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

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

PAGE 51 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Baytown Chamber Of Commerce**

Mailing Address 1300 Rollingbrook Ste 400

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

City

Baytown

State

TX

Zip Code

77521

Purpose of Disbursement  
Sustaining membership

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB5501

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st St SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 13  |   | 2023    |

City

Washington

State

DC

Zip Code

20003

Purpose of Disbursement  
Meeting and meal

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1024.00

Transaction ID : SB5596

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Capitol Hill Club**

Mailing Address 300 1st St SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 14  |   | 2023    |

City

Washington

State

DC

Zip Code

20003

Purpose of Disbursement  
Meeting and meal

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

551.12

Transaction ID : SB5536

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

1875.12

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

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

PAGE 52 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Meeting and meal

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

436.73

Transaction ID : SB5460

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chase Card Services**

Mailing Address 270 Park Ave

City  
New YorkState  
NYZip Code  
10017Purpose of Disbursement  
Credit card payment (see below if itemized)

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 2 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

350.80

Transaction ID : SB5582

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

287.20

Transaction ID : SB5627

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

787.53

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

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

PAGE 53 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 07  |   | 2022    |

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

29.00

Transaction ID : SB5628

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 07  |   | 2022    |

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

29.00

Transaction ID : SB5629

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 16  |   | 2022    |

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

5.60

Transaction ID : SB5626

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

0.00

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

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

PAGE 54 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Chase Card Services**

Mailing Address 270 Park Ave

City  
New YorkState  
NYZip Code  
10017Purpose of Disbursement  
See below if itemized

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5520.45

Transaction ID : SB5571

☐ Memo Item**B. Atlas Brew Works**

Mailing Address 1201 Half St Se Ste 120

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Meeting and meal

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

209.00

Transaction ID : SB5575

☒ Memo Item**c. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Meeting and meal

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

258.50

Transaction ID : SB5594

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

5520.45

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

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

PAGE 55 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Carmines DC**

Mailing Address 425 7Th St Nw

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 11  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20004

FEC Identification Number

C

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1018.50

Transaction ID : SB5600

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. CreateSend**

Mailing Address 123 Mission St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 09  |   | 2023    |

City  
San FranciscoState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

315.15

Transaction ID : SB5609

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. District Taco**

Mailing Address 1309 F St NW Ste 1

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 11  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20004

FEC Identification Number

C

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1551.00

Transaction ID : SB5601

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

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

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

PAGE 56 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Hobby Lobby**

Mailing Address 7707 Sw 44Th St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 12  |   | 2023    |

City  
Oklahoma CityState  
OKZip Code  
73179

FEC Identification Number

C

Purpose of Disbursement  
Campaign event supplies

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

468.55

Transaction ID : SB5597

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Hobby Lobby**

Mailing Address 7707 Sw 44Th St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 12  |   | 2023    |

City  
Oklahoma CityState  
OKZip Code  
73179

FEC Identification Number

C

Purpose of Disbursement  
Campaign event supplies

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

568.13

Transaction ID : SB5598

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Lumberton Catfish Cabin**

Mailing Address 192 S Highway 287/69 Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 18  |   | 2023    |

City  
LumbertonState  
TXZip Code  
77657

FEC Identification Number

C

Purpose of Disbursement  
Meeting and meal

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

200.44

Transaction ID : SB5590

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

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

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

PAGE 57 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Singh Car Service**

Mailing Address 10640 John Ayres Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 30  |   | 2023    |

City  
FairfaxState  
VAZip Code  
22032

FEC Identification Number

C

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

72.00

Transaction ID : SB5573

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address 140 West St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 08  |   | 2023    |

City  
New YorkState  
NYZip Code  
10007

FEC Identification Number

C

Purpose of Disbursement  
Cell phone service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

130.38

Transaction ID : SB5610

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**c. Chase Card Services**

Mailing Address 270 Park Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 28  |   | 2023    |

City  
New YorkState  
NYZip Code  
10017

FEC Identification Number

C

Purpose of Disbursement  
See below if itemized

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

9349.72

Transaction ID : SB5499

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

9349.72

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

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

PAGE 58 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. A1 Mini Storage**

Mailing Address 6340 US Highway 69 S

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 10  |   | 2023    |

City  
WoodvilleState  
TXZip Code  
75979

FEC Identification Number

C

Purpose of Disbursement  
Storage space

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

58.00

Transaction ID : SB5544

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Blacklane**

Mailing Address 929 Colorado Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 22  |   | 2023    |

City  
Santa MonicaState  
CAZip Code  
90401

FEC Identification Number

C

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

165.29

Transaction ID : SB5517

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**c. Capitol Hill Club**

Mailing Address 300 1st St SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 15  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
Meeting and meal

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

77.00

Transaction ID : SB5532

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

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

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

PAGE 59 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Coins For Anything**

Mailing Address 100 Industrial Dr

City  
FredericksburgState  
VAZip Code  
22408Purpose of Disbursement  
Campaign event supplies

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1785.38

Transaction ID : SB5503

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CreateSend**

Mailing Address 123 Mission St

City  
San FranciscoState  
CAZip Code  
94105Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

315.15

Transaction ID : SB5546

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Enterprise Rent a Car**

Mailing Address 600 Corporate Park Dr

City  
Saint LouisState  
MOZip Code  
63105Purpose of Disbursement  
Car rental

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

303.49

Transaction ID : SB5520

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

0.00

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

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

PAGE 60 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GoDaddy**

Mailing Address 200 S Akard St

City  
DallasState  
TXZip Code  
75202Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.17

Transaction ID : SB5554

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Harris County Republican Party**

Mailing Address 2501A Central Pkwy # A-11

City  
HoustonState  
TXZip Code  
77092Purpose of Disbursement  
Political contribution

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB5559

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Omni Barton Creek**

Mailing Address 8212 Barton Club Dr

City  
AustinState  
TXZip Code  
78735Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

476.13

Transaction ID : SB5506

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

0.00

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

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

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|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. The Congressional Club**

Mailing Address 2001 New Hampshire Ave NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 25  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20009

FEC Identification Number

C

Purpose of Disbursement  
Event fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

800.00

Transaction ID : SB5510

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. The Congressional Club**

Mailing Address 2001 New Hampshire Ave NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 25  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20009

FEC Identification Number

C

Purpose of Disbursement  
Event fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

800.00

Transaction ID : SB5511

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. The Congressional Institute**

Mailing Address 1700 Diagonal Rd Ste 730

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 14  |   | 2023    |

City  
AlexandriaState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
Policy Conference

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1797.00

Transaction ID : SB5537

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 62 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 07  |   | 2023    |

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

52.90

Transaction ID : SB5555

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 09  |   | 2023    |

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

197.90

Transaction ID : SB5547

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 22  |   | 2023    |

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

234.90

Transaction ID : SB5514

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

0.00

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

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

PAGE 63 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

234.90

Transaction ID : SB5515

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 475 L'Enfant Plz SW

City  
WashingtonState  
DCZip Code  
20260Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

12.08

Transaction ID : SB5530

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address 140 West St

City  
New YorkState  
NYZip Code  
10007Purpose of Disbursement  
Cell phone service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

130.59

Transaction ID : SB5548

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

0.00

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

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

PAGE 64 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Chase Card Services**

Mailing Address 270 Park Ave

City  
New YorkState  
NYZip Code  
10017Purpose of Disbursement  
Credit card payment (see below if itemized)

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

309.47

Transaction ID : SB5464

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Ritz Carlton**

Mailing Address 10400 Fernwood Rd

City  
BethesdaState  
MDZip Code  
20817Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

131.00

Transaction ID : SB5521

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chase Card Services**

Mailing Address 270 Park Ave

City  
New YorkState  
NYZip Code  
10017Purpose of Disbursement  
See below if itemized

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

14476.82

Transaction ID : SB5417

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

14786.29

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

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

PAGE 65 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. A1 Mini Storage**

Mailing Address 6340 US Highway 69 S

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 10  |   | 2023    |

City  
WoodvilleState  
TXZip Code  
75979

FEC Identification Number

C

Purpose of Disbursement  
Storage space

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

58.00

Transaction ID : SB5470

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st St SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 15  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
Meeting and meal

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

326.99

Transaction ID : SB5456

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Carmines DC**

Mailing Address 425 7Th St Nw

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 08  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20004

FEC Identification Number

C

Purpose of Disbursement  
Meeting and meal

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

372.41

Transaction ID : SB5474

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

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

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

PAGE 66 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Corral Club**

Mailing Address 3 Nrg Park

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 17  |   | 2023    |

City  
HoustonState  
TXZip Code  
77054

FEC Identification Number

C

Purpose of Disbursement  
Meeting and meal

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5450

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. CreateSend**

Mailing Address 123 Mission St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 09  |   | 2023    |

City  
San FranciscoState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

315.15

Transaction ID : SB5471

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Enterprise Rent a Car**

Mailing Address 600 Corporate Park Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 19  |   | 2023    |

City  
Saint LouisState  
MOZip Code  
63105

FEC Identification Number

C

Purpose of Disbursement  
Car rental

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

176.36

Transaction ID : SB5444

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

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

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

PAGE 67 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. F&B NRG Stadium**

Mailing Address 1 Nrg Park

Date of Disbursement

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

City  
HoustonState  
TXZip Code  
77054

FEC Identification Number

C

Purpose of Disbursement  
Event fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

513.70

Transaction ID : SB5454

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Google Services**

Mailing Address 1600 Amphitheatre Pkwy

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 3 |   | 2 | 0 | 2 | 3 |

City  
Mountain ViewState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
Internet service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.31

Transaction ID : SB5438

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Hampton Inns**

Mailing Address 7930 Jones Branch Dr

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
Mc LeanState  
VAZip Code  
22102

FEC Identification Number

C

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

328.18

Transaction ID : SB5446

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 68 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Harris County Republican Party**

Mailing Address 2501A Central Pkwy # A-11

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

City  
HoustonState  
TXZip Code  
77092

FEC Identification Number

C

Purpose of Disbursement  
Event fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5495

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Harris County Republican Party**

Mailing Address 2501A Central Pkwy # A-11

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

City  
HoustonState  
TXZip Code  
77092

FEC Identification Number

C

Purpose of Disbursement  
Event fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5497

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**c. House Gift Shop**

Mailing Address 1440 New York Ave NW

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20005

FEC Identification Number

C

Purpose of Disbursement  
Special Occasion Gift

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

98.40

Transaction ID : SB5429

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 69 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Houston Rodeo**

Mailing Address NRG Center 3 NRG Park

City  
HoustonState  
TXZip Code  
77054Purpose of Disbursement  
Event fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6138.00

Transaction ID : SB5481

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Houston Rodeo**

Mailing Address NRG Center 3 NRG Park

City  
HoustonState  
TXZip Code  
77054Purpose of Disbursement  
Event fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

279.00

Transaction ID : SB5457

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Louis Vuitton #173**

Mailing Address 11600 Century Oaks Ter

City  
AustinState  
TXZip Code  
78758Purpose of Disbursement  
Special Occasion Gift

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3010.40

Transaction ID : SB5428

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

0.00

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

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

PAGE 70 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Marriot Houston**

Mailing Address 806 Main St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

City  
HoustonState  
TXZip Code  
77002

FEC Identification Number

C

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

475.94

Transaction ID : SB5483

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Marriot Houston**

Mailing Address 806 Main St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

City  
HoustonState  
TXZip Code  
77002

FEC Identification Number

C

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

389.72

Transaction ID : SB5451

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**c. Republican Congressional Spouses**

Mailing Address 2001 New Hampshire Ave NW

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20009

FEC Identification Number

C

Purpose of Disbursement  
Meeting and meal

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

40.00

Transaction ID : SB5433

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

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

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

PAGE 71 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Republican Congressional Spouses**

Mailing Address 2001 New Hampshire Ave NW

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Meeting and meal

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

45.00

Transaction ID : SB5424

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. US Senate Gift Shop**

Mailing Address 50 Constitution Ave Ne

City  
WashingtonState  
DCZip Code  
20510Purpose of Disbursement  
Special Occasion Gift

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : SB5422

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 475 L'Enfant Plz SW

City  
WashingtonState  
DCZip Code  
20260Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

63.00

Transaction ID : SB5449

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

0.00

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

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

PAGE 72 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address 140 West St

City  
New YorkState  
NYZip Code  
10007Purpose of Disbursement  
Cell phone service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

130.59

Transaction ID : SB5473

☒ Memo Item**B. Chase Card Services**

Mailing Address 270 Park Ave

City  
New YorkState  
NYZip Code  
10017Purpose of Disbursement  
Credit card payment (see below if itemized)

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2671.89

Transaction ID : SB5646

☐ Memo Item**C. Clear Lake Area Chamber of Commerce**

Mailing Address 1201 Nasa Pkwy

City  
HoustonState  
TXZip Code  
77058Purpose of Disbursement  
Sustaining membership

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

289.00

Transaction ID : SB5534

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

2960.89

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

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

PAGE 73 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A.** Iglesias, Rachel, , ,

Mailing Address 6279 County Road 1325

City  
WarrenState  
TXZip Code  
77664Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB5617

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Iglesias, Rachel, , ,

Mailing Address 6279 County Road 1325

City  
WarrenState  
TXZip Code  
77664Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

398.00

Transaction ID : SB5618

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Iglesias, Rachel, , ,

Mailing Address 6279 County Road 1325

City  
WarrenState  
TXZip Code  
77664Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

525.00

Transaction ID : SB5524

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

1523.00

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

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

PAGE 74 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A.** Iglesias, Rachel, , ,

Mailing Address 6279 County Road 1325

City  
WarrenState  
TXZip Code  
77664Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 16  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

427.06

Transaction ID : SB5525

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Iglesias, Rachel, , ,

Mailing Address 6279 County Road 1325

City  
WarrenState  
TXZip Code  
77664Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 02  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

375.00

Transaction ID : SB5485

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Iglesias, Rachel, , ,

Mailing Address 6279 County Road 1325

City  
WarrenState  
TXZip Code  
77664Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 02  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

298.94

Transaction ID : SB5486

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

1101.00

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

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

PAGE 75 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A.** Iglesias, Rachel, , ,

Mailing Address 6279 County Road 1325

City  
WarrenState  
TXZip Code  
77664Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB5415

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Iglesias, Rachel, , ,

Mailing Address 6279 County Road 1325

City  
WarrenState  
TXZip Code  
77664Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

469.77

Transaction ID : SB5416

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Janushkowsky, Stephen, , ,

Mailing Address 17 4th St SE Apt 3

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5621

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

1319.77

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

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

PAGE 76 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Janushkowsky, Stephen, , ,**

Mailing Address 17 4th St SE Apt 3

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5563

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Janushkowsky, Stephen, , ,**

Mailing Address 17 4th St SE Apt 3

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5492

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Keel Systems LLC**

Mailing Address 23812 Tres Coronas Rd

City  
SpicewoodState  
TXZip Code  
78669Purpose of Disbursement  
Compliance services

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB5569

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

2500.00

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

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

PAGE 77 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Keel Systems LLC**

Mailing Address 23812 Tres Coronas Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 31  |   | 2023    |

City  
SpicewoodState  
TXZip Code  
78669

FEC Identification Number

C

Purpose of Disbursement  
Compliance services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2922.75

Transaction ID : SB5570

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Keel Systems LLC**

Mailing Address 23812 Tres Coronas Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 03  |   | 2023    |

City  
SpicewoodState  
TXZip Code  
78669

FEC Identification Number

C

Purpose of Disbursement  
Compliance services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2413.46

Transaction ID : SB5560

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Keel Systems LLC**

Mailing Address 23812 Tres Coronas Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 27  |   | 2023    |

City  
SpicewoodState  
TXZip Code  
78669

FEC Identification Number

C

Purpose of Disbursement  
Compliance services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2400.00

Transaction ID : SB5432

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

7736.21

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

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

PAGE 78 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Lilly & Company**

Mailing Address 1005 Congress Ave Ste 400

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 31  |   | 2023    |

City  
AustinState  
TXZip Code  
78701Purpose of Disbursement  
Fundraising and reimbursement (see below if itemized)

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

6224.71

Transaction ID : SB5568

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lilly & Company**

Mailing Address 1005 Congress Ave Ste 400

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 01  |   | 2023    |

City  
AustinState  
TXZip Code  
78701Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB5630

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Texas Mailhouse, Inc.**

Mailing Address PO Box 141248

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 10  |   | 2023    |

City  
AustinState  
TXZip Code  
78714Purpose of Disbursement  
Direct mail services

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

273.42

Transaction ID : SB5605

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

6224.71

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

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

PAGE 79 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Thomas Graphics**

Mailing Address PO Box 142226

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

City  
AustinState  
TXZip Code  
78714Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1901.80

Transaction ID : SB5607

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 475 L'Enfant Plz SW

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20260Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

612.94

Transaction ID : SB5606

☒ Memo Item

Full Name (Last, First, Middle Initial)

**c. Lilly & Company**

Mailing Address 1005 Congress Ave Ste 400

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

City  
AustinState  
TXZip Code  
78701Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

3081.19

Transaction ID : SB5557

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

3081.19

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

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

PAGE 80 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Lilly & Company**

Mailing Address 1005 Congress Ave Ste 400

City  
AustinState  
TXZip Code  
78701Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

13881.10

Transaction ID : SB5553

☐ Memo Item**B. Lilly & Company**

Mailing Address 1005 Congress Ave Ste 400

City  
AustinState  
TXZip Code  
78701Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4052.24

Transaction ID : SB5526

☐ Memo Item**c. Lilly & Company**

Mailing Address 1005 Congress Ave Ste 400

City  
AustinState  
TXZip Code  
78701Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9325.95

Transaction ID : SB5431

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

27259.29

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

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

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|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd Ste 203

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 06  |   | 2023    |

City  
Las VegasState  
NVZip Code  
89147

FEC Identification Number

C

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2013.32

Transaction ID : SB5613

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd Ste 203

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 03  |   | 2023    |

City  
Las VegasState  
NVZip Code  
89147

FEC Identification Number

C

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2020.64

Transaction ID : SB5561

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd Ste 203

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 27  |   | 2023    |

City  
Las VegasState  
NVZip Code  
89147

FEC Identification Number

C

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2058.26

Transaction ID : SB5430

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

6092.22

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

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

PAGE 82 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Singh Car Service**

Mailing Address 10640 John Ayres Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 12  |   | 2023    |

City  
FairfaxState  
VAZip Code  
22032

FEC Identification Number

C

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

48.00

Transaction ID : SB5639

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. The Congressional Institute**

Mailing Address 1700 Diagonal Rd Ste 730

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 14  |   | 2023    |

City  
AlexandriaState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
Policy Conference

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

153.00

Transaction ID : SB5641

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**c. The M Group**

Mailing Address 12353 Sunrise Valley Dr Ste M

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 07  |   | 2023    |

City  
RestonState  
VAZip Code  
20191

FEC Identification Number

C

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

9103.24

Transaction ID : SB5552

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

9103.24

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

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

PAGE 83 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

505.45

Transaction ID : SB5631

☒ Memo Item**B. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

505.45

Transaction ID : SB5632

☒ Memo Item**c. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

230.00

Transaction ID : SB5633

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

0.00

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

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

PAGE 84 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

162.90

Transaction ID : SB5634

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

197.90

Transaction ID : SB5635

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

162.90

Transaction ID : SB5636

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

0.00

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

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

PAGE 85 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB5637

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB5638

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

38.20

Transaction ID : SB5640

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

0.00

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

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

PAGE 86 OF 104

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

229.90

Transaction ID : SB5642

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

168.70

Transaction ID : SB5643

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.96

Transaction ID : SB5645

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

0.00

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

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

PAGE 87 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address 140 West St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
New YorkState  
NYZip Code  
10007

FEC Identification Number

C

Purpose of Disbursement  
Cell phone service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

92.26

Transaction ID : SB5588

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address 140 West St

Date of Disbursement

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

City  
New YorkState  
NYZip Code  
10007

FEC Identification Number

C

Purpose of Disbursement  
Cell phone service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

92.42

Transaction ID : SB5527

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address 140 West St

Date of Disbursement

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

City  
New YorkState  
NYZip Code  
10007

FEC Identification Number

C

Purpose of Disbursement  
Cell phone service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

92.42

Transaction ID : SB5453

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

277.10

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

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

PAGE 88 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Waterman, Kelly, W., Mr.,**

Mailing Address 5706 Indian Cir

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 03  |   | 2023    |

City  
HoustonState  
TXZip Code  
77057Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5620

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Waterman, Kelly, W., Mr.,**

Mailing Address 5706 Indian Cir

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
HoustonState  
TXZip Code  
77057Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5564

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Waterman, Kelly, W., Mr.,**

Mailing Address 5706 Indian Cir

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

City  
HoustonState  
TXZip Code  
77057Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5490

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

750.00

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

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

PAGE 89 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

300.82

Transaction ID : SB5498

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

59.90

Transaction ID : SB5484

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.04

Transaction ID : SB5472

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

361.76

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

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

PAGE 90 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.24

Transaction ID : SB5463

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.42

Transaction ID : SB5455

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.89

Transaction ID : SB5441

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

12.55

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

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

PAGE 91 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.04

Transaction ID : SB5440

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.04

Transaction ID : SB5436

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : SB5435

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

1.07

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

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

PAGE 92 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd Ste 530

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.09

Transaction ID : SB5425

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Ziegler, Lauren, , ,**

Mailing Address 1715 6Th St Nw

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 03  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20001

FEC Identification Number

C

Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5619

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**c. Ziegler, Lauren, , ,**

Mailing Address 1715 6Th St Nw

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20001

FEC Identification Number

C

Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5565

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

500.09

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

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

PAGE 93 OF 104

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A.** Ziegler, Lauren, , ,

Mailing Address 1715 6Th St Nw

City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
General Campaign Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB5491

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

250.00

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

105182.50

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

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|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ALEX MOONEY FOR CONGRESS**

Mailing Address Po Box 1863

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
MartinsburgState  
WVZip Code  
25402

FEC Identification Number

**C** C00629949Purpose of Disbursement  
Political contribution

Candidate Name

MOONEY, ALEXANDER XAVIER, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5414

☐ Memo Item

State: WV

District: 02

Full Name (Last, First, Middle Initial)

**B. Anna Paulina Luna For Congress**

Mailing Address Po Box 23064

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
Saint PetersburgState  
FLZip Code  
33742

FEC Identification Number

**C** C00718239Purpose of Disbursement  
Political contribution

Candidate Name

PAULINA LUNA, ANNA, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5395

☐ Memo Item

State: FL

District: 13

Full Name (Last, First, Middle Initial)

**C. ASHLEY HINSON FOR CONGRESS**

Mailing Address Po Box 811

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
MarionState  
IAZip Code  
52302

FEC Identification Number

**C** C00706267Purpose of Disbursement  
Political contribution

Candidate Name

ARENHOLZ, ASHLEY HINSON, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5397

☐ Memo Item

State: IA

District: 02

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

5000.00

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

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

PAGE 95 OF 104

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BRANDON FOR CONGRESS NY22**

Mailing Address Po Box 3580

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
SyracuseState  
NYZip Code  
13220

FEC Identification Number

**C** C00806307Purpose of Disbursement  
Political contribution

Candidate Name

WILLIAMS, BRANDON MCDONALD, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5407

☐ Memo Item

State: NY

District: 22

Full Name (Last, First, Middle Initial)

**B. Chuck Edwards For Congress**

Mailing Address 337 N Main St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
HendersonvilleState  
NCZip Code  
28792

FEC Identification Number

**C** C00796433Purpose of Disbursement  
Political contribution

Candidate Name

EDWARDS, CHUCK, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5401

☐ Memo Item

State: NC

District: 11

Full Name (Last, First, Middle Initial)

**C. CISCOMANI FOR CONGRESS**

Mailing Address Po Box 35103

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
TucsonState  
AZZip Code  
85740

FEC Identification Number

**C** C00786194Purpose of Disbursement  
Political contribution

Candidate Name

CISCOMANI, JUAN, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5387

☐ Memo Item

State: AZ

District: 06

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

5000.00

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

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

PAGE 96 OF 104

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. DESPOSITO FOR NEW YORK**

Mailing Address Po Box 188

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
Island ParkState  
NYZip Code  
11558

FEC Identification Number

**C** C00809426Purpose of Disbursement  
Political contribution

Candidate Name

DESPOSITO, ANTHONY P, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5404

☐ Memo Item

State: NY

District: 04

Full Name (Last, First, Middle Initial)

**B. DON BACON FOR CONGRESS**

Mailing Address PO Box 391368

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
OmahaState  
NEZip Code  
68139

FEC Identification Number

**C** C00575167Purpose of Disbursement  
Political contribution

Candidate Name

BACON, DONALD J, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5402

☐ Memo Item

State: NE

District: 02

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DAVID SCHWEIKERT**

Mailing Address 8175 E Evans Rd # 13176

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
ScottsdaleState  
AZZip Code  
85267

FEC Identification Number

**C** C00540617Purpose of Disbursement  
Political contribution

Candidate Name

SCHWEIKERT, DAVID S., , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5386

☐ Memo Item

State: AZ

District: 01

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

3000.00

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

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

PAGE 97 OF 104

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. IOWANS FOR ZACH NUNN**

Mailing Address PO Box 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
BondurantState  
IAZip Code  
50035

FEC Identification Number

**C** C00784389Purpose of Disbursement  
Political contribution

Candidate Name

NUNN, ZACH, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5398

☐ Memo Item

State: IA

District: 03

Full Name (Last, First, Middle Initial)

**B. John Duarte for Congress**

Mailing Address 9460 Tegner Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
HillmarState  
CAZip Code  
95324

FEC Identification Number

**C** C00808279Purpose of Disbursement  
Political contribution

Candidate Name

DUARTE, JOHN, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5398

☐ Memo Item

State: CA

District: 13

Full Name (Last, First, Middle Initial)

**c. John James for Congress, Inc.**

Mailing Address Po Box 628

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
Saint Clair ShoresState  
MIZip Code  
48080

FEC Identification Number

**C** C00803502Purpose of Disbursement  
Political contribution

Candidate Name

JAMES, JOHN, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5398

☐ Memo Item

State: MI

District: 10

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

5000.00

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

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

PAGE 98 OF 104

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Kean For Congress**

Mailing Address Po Box 999

City  
EdisonState  
NJZip Code  
08818Purpose of Disbursement  
Political contribution

Candidate Name

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB5403

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ken Calvert for Congress Committee**

Mailing Address Po Box 2438

City  
CoronaState  
CAZip Code  
92878Purpose of Disbursement  
Political contribution

Candidate Name

CALVERT, KEN, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 41

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00257337

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB5392

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KEVIN KILEY FOR CONGRESS**

Mailing Address 9458 Treelake Rd

City  
Granite BayState  
CAZip Code  
95746Purpose of Disbursement  
Political contribution

Candidate Name

KILEY, KEVIN, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 03

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00801985

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB5388

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

5000.00

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

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

PAGE 99 OF 104

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. KIGGANS FOR CONGRESS**

Mailing Address Po Box 5042

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
Virginia BeachState  
VAZip Code  
23471

FEC Identification Number

**C** C00776120Purpose of Disbursement  
Political contribution

Candidate Name

KIGGANS, JENNIFER, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5411

☐ Memo Item

State: VA

District: 02

Full Name (Last, First, Middle Initial)

**B. Lauren Boebert For Congress**

Mailing Address Po Box 752

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
SiltState  
COZip Code  
81652

FEC Identification Number

**C** C00728238Purpose of Disbursement  
Political contribution

Candidate Name

BOEBERT, LAUREN, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5394

☐ Memo Item

State: CO

District: 03

Full Name (Last, First, Middle Initial)

**C. Lawler for Congress**

Mailing Address PO Box 87

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
South SalemState  
NYZip Code  
10590

FEC Identification Number

**C** C00815415Purpose of Disbursement  
Political contribution

Candidate Name

LAWLER, MICHAEL VINCENT, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5405

☐ Memo Item

State: NY

District: 17

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

3000.00

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

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

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|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LORI CHAVEZ-DEREMER FOR CONGRESS**

Mailing Address 11805 SE Eastbourne Ln

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
Happy ValleyState  
ORZip Code  
97086

FEC Identification Number

☒ C00784520Purpose of Disbursement  
Political contribution

Candidate Name

CHAVEZ-DEREMER, LORI, , ,

Category/  
Type

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5408

☐ Memo Item

State: OR

District: 05

Full Name (Last, First, Middle Initial)

**B. MARC FOR US**

Mailing Address Po Box 5158

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
PoughkeepsieState  
NYZip Code  
12602

FEC Identification Number

☒ C00789586Purpose of Disbursement  
Political contribution

Candidate Name

MOLINARO, MARCUS J., , ,

Category/  
Type

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5406

☐ Memo Item

State: NY

District: 19

Full Name (Last, First, Middle Initial)

**c. Michelle Steel for Congress**

Mailing Address 9070 Irvine Center Dr Ste 150

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
IrvineState  
CAZip Code  
92618

FEC Identification Number

☒ C00704981Purpose of Disbursement  
Political contribution

Candidate Name

STEEL, MICHELLE, , ,

Category/  
Type

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5393

☐ Memo Item

State: CA

District: 45

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

|         |
|---------|
| 4000.00 |
|---------|

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

|  |
|--|
|  |
|--|

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

PAGE 101 OF 104

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MIKE BOST FOR CONGRESS COMMITTEE**

Mailing Address PO Box 1212

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
MurphysboroState  
ILZip Code  
62966

FEC Identification Number

**C** C00546499Purpose of Disbursement  
Political contribution

Candidate Name

BOST, MICHAEL, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5413

☐ Memo Item

State: IL

District: 12

Full Name (Last, First, Middle Initial)

**B. Miller-Meeks for Congress**

Mailing Address PO Box 33

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
OttumwaState  
IAZip Code  
52501

FEC Identification Number

**C** C00558825Purpose of Disbursement  
Political contribution

Candidate Name

MILLER-MEEKS, MARIANNETTE JANE, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5396

☐ Memo Item

State: IA

District: 01

Full Name (Last, First, Middle Initial)

**c. Nancy Mace For Congress**

Mailing Address 295 Seven Farms Dr Ste C-186

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
Daniel IslandState  
SCZip Code  
29492

FEC Identification Number

**C** C00710103Purpose of Disbursement  
Political contribution

Candidate Name

MACE, NANCY, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5410

☐ Memo Item

State: SC

District: 01

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

4000.00

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

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

PAGE 102 OF 104

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. National Republican Congressional Committee**

Mailing Address 320 1st St SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20003

FEC Identification Number

**C** C00075820Purpose of Disbursement  
Political contribution

Candidate Name

National Republican Congressional Committee

Category/  
Type

Amount of Each Disbursement this Period

50000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5421

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. Patriots for Perry**

Mailing Address Po Box 633

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

City  
New CumberlandState  
PAZip Code  
17070

FEC Identification Number

**C** C00510164Purpose of Disbursement  
Political contribution

Candidate Name

PERRY, SCOTT, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5409

☐ Memo Item

State: PA

District: 10

Full Name (Last, First, Middle Initial)

**C. STEIL FOR WISCONSIN**

Mailing Address 1818 Milton Ave # 1448

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

City  
JanesvilleState  
WIZip Code  
53545

FEC Identification Number

**C**Purpose of Disbursement  
Political contribution

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5412

☐ Memo Item

State:

District:

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

52000.00

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

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

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|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Tyler County Republican Women**

Mailing Address 8067 FM 1943 Rd E

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 03  |   | 2023    |

City  
WarrenState  
TXZip Code  
77664

FEC Identification Number

C

Purpose of Disbursement  
Event Sponsorship

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

300.00

Transaction ID : SB5622

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. VALADAO FOR CONGRESS**

Mailing Address 5132 N Palm Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
FresnoState  
CAZip Code  
93704

FEC Identification Number

C C00499392

Purpose of Disbursement  
Political contribution

Candidate Name

VALADAO, DAVID, , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB5390

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 22

Full Name (Last, First, Middle Initial)

**c. Young Kim for Congress**

Mailing Address Po Box 2186

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
FullertonState  
CAZip Code  
92837

FEC Identification Number

C C00665638

Purpose of Disbursement  
Political contribution

Candidate Name

KIM, YOUNG, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB5391

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 40

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

3300.00

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

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

PAGE 104 OF 104

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DR. BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. Zinke For Congress**

Mailing Address Po Box 1597

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
HelenaState  
MTZip Code  
59624

FEC Identification Number

**C** C00778159Purpose of Disbursement  
Political contribution

Candidate Name

ZINKE, RYAN K, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB5400

☐ Memo Item

State: MT District: 01

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼☐ Memo Item

State:

District:

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

2000.00

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

91300.00